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State of Connecticut
PUBLIC DOCUMENT No. 25

TWENTY-THIRD ANNUAL REPORT
OF THE
State Board of Health
OF THE
State of Connecticut
FOR THE YEAR 1900
WITH THE
Registration Report for 1899 relating to Births,
Marriages, Deaths and Divorces

PRINTED BY ORDER OF THE LEGISLATURE

NEW HAVEN:
THE TUTTLE, MOREHOUSE & TAYLOR COMPANY
1901



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State of Connecticut.

OFFICE OF SECRETARY OF STATE BOARD OF HEALTH,
NEW HAVEN, CONN., Dec. 1, 1900.

To His Excellency, George P. McLean, Governor of Connecticut:

SIR:—In compliance with the laws of the State, I have the honor to present to you the Twenty-third Report of the State Board of Health; also the Registration Report of the Bureau of Vital Statistics for the year ending December 31, 1899.

Very respectfully,

C. A. LINDSLEY,

*Secretary of State Board of Health and Superintendent of
Registration of Vital Statistics.*

GENERAL REPORT.

To His Excellency, George E. Lounsbury, Governor of Connecticut:

SIR:—Complying with the law which requires the State Board of Health to make an Annual Report to you in each year, “upon the vital statistics and the sanitary condition and prospects of the State,” the twenty-third annual report of the Board is herewith submitted.

It embraces the following subjects:

A BRIEF GENERAL REPORT.

THE ANNUAL REPORT OF THE SECRETARY.

THE ANNUAL REPORTS OF THE COUNTY HEALTH OFFICERS.

ABSTRACTS OF THE ANNUAL REPORTS OF THE CITY, BOROUGH, AND TOWN HEALTH OFFICERS.

REPORT OF DELEGATE TO STATE AND PROVINCIAL BOARDS OF HEALTH OF NORTH AMERICA.

REPORT OF DELEGATES TO AMERICAN PUBLIC HEALTH ASSOCIATION.

REPORT ON AN EPIDEMIC OF TYPHOID FEVER IN FORESTVILLE.

REPORT ON THE SEYMOUR SPRING, SOUTH NORWALK.

COMPULSORY LAWS AFFECTING PUBLIC HEALTH.

REPORT ON THE INVESTIGATION OF RIVERS POLLUTION AND WATER SUPPLIES.

LIST OF HEALTH OFFICERS.

EXAMINING COMMITTEES OF MEDICAL SOCIETIES.

LIST OF REGISTERED PRACTITIONERS.

ANNUAL REPORT OF DENTAL COMMISSIONERS.

THE PERSONNEL OF THE BOARD.

The personnel of the Board has not been changed during the year. The Board by law consists of seven members, four at least of whom must be physicians and one a lawyer. Of the original members of the Board as it was constituted at its organization, but two are now living. They have held a continuous connection with it from its beginning. It has had

only two presidents and one secretary, beside those now in office. Since its incorporation in 1878, fifteen individuals have been members of it. Of these, one was an editor, one a scientist, eight physicians, four lawyers, and one is a civil engineer.

During the past year, the quarterly meetings required by law have been regularly held and well attended. This is the twenty-third annual report of the Connecticut State Board of Health.

While there is in each successive year a certain amount of repetition of what was done in previous years and necessarily of a routine nature, yet there has been also, from year to year, a marked progressive character in the work of the Board. This is conspicuously manifested in the systematic, methodical and orderly way in which the sanitary administration of the State is conducted now as compared with the unmethodical, chaotic and headless proceedings of twenty years ago. The progress has been gradual, and can be best appreciated by contrasting the conditions at the extremes of its existence.

It has been a slow and often discouraging undertaking to overcome the long established habits of conservative people. While there have been progressive individuals in every community, yet communities as a whole have seemed to be satisfied with existing sanitary conditions, and in very many towns to have a fixed incredulity as to the possibility of improvement of them. There was, it is true, a nominal board of health in every town, charged with the administration of public hygiene.

It had a sort of *ex-officio* existence, its members being such by reason of holding other offices. But they had no well defined duties, were responsible to no other authority, for the most part had no compensation, and more often than otherwise, their occasional and rare efforts to make existing conditions more sanitary, were resented by the citizens concerned, or ignored with silent contempt. Applied sanitary science had, twenty years ago, made but little progress in this country. Health officials were not chosen with reference to practical expert knowledge, and in a majority of instances the legally constituted town board of health never acted as such, from one year's end to another. There was no *state* sanitary administration whatever. Everything that was done was done *townwise*, and

each separate town was a distinct and independent unit. There was no concert of action among the towns—no guiding influence whatever to direct the one hundred and sixty odd units to the accomplishment of any common purpose. Until the State Board of Health was established, no provision existed for organizing sanitary undertakings on any systematic methods relating to the state as a whole. No means existed by which any practical knowledge of the condition of the general health of the State could be acquired, or modern means of promoting it be adopted. No reports of the occurrence of contagious diseases in a community were required by law, except in the case of tavern keepers and keepers of lodging houses, and of them, only during certain months in the year. And this requirement was universally ignored. The only basis upon which to estimate the state of the public health throughout Connecticut, in the condition of vital statistics as then kept, was the reports made once a year by the town registrars of the mortality in their respective towns and the causes of death.

What the State Board of Health has done in the way of organization and practical effective work, will be appreciated by contrasting the methods of sanitary administration and vital statistics of the past year, with the situation described above.

The heterogeneous body composed of the selectmen and justices of the peace which formerly constituted the town board of health, is everywhere abolished. Instead, there is in every town, borough and city in the State, a legally appointed health officer, whose compensation is regulated by law and who is charged with the responsibility of sanitary administration throughout his jurisdiction. The charters of a few of the cities modify slightly this practice, but do not alter the essential principles of the system.

No step in sanitary legislation has been followed by more practical good results than that which placed the responsibility upon an individual in each town, borough and city, made his office independent of the popular vote, extended the tenure of his office to four years, and provided for his compensation.

Other important legislation secured by the influence of the State Board requires that every case of infectious disease shall be promptly reported to the local health officer, who immediately takes supervision of the precautions necessary to prevent its spread. Then, during the first week of the following month,

the local health officer must make report to the State Board of the number and kinds of infectious diseases which have occurred within his jurisdiction. At the same time the registrar of vital statistics reports to the Board the number of deaths in his town, occurring from any disease or other cause. In this way the State Board is kept informed of the sickness prevailing in every part of the State, and of the mortality resulting therefrom. From these facts, which are collected with more accuracy in Connecticut than in any other state in the Union, it is possible to know the location of every outbreak of infectious disease and to render such advisory service as the occasion may demand, to estimate the varying death-rate of each disease, the percentage of each disease to the total mortality in different years, the percentage of mortality to the total cases of the same disease in different years, and in various other ways to estimate the influences which promote disease and the results.

Thus in the year ending October 31st, exactly 1,700 cases of scarlet fever were reported in the State, but as many cases were very mild and not attended by a doctor, and not reported, it is safe to say that there were more than 2,000 cases in fact. The deaths, however, were fully reported and numbered only 55. Hence less than 3 per cent. of all the cases were fatal. A remarkably low death-rate and indicating a very mild type of the disease.

On the other hand, there were 1,163 cases of typhoid fever reported. This disease, by reason of its severity and duration, is more fully reported than scarlet fever, and probably the whole number sick did not exceed 1,300 cases. Of this disorder 268 were fatal, giving a death-rate of over 20 per cent. of the cases, which is a very high rate, much in excess of the usual fatality.*

* It is interesting in this connection to note the death-rate from typhoid fever in the hospitals. I have reports from six hospitals, viz., the Hartford Hospital, General Hospital at New Haven, Bridgeport Hospital, the Danbury Hospital, the Norwich and Meriden Hospitals, for the two years 1899 and 1900. The total cases numbered 693 during the two years, and the deaths 55, giving a percentage of only 6.8.

If there is no material error in the diagnosis and reports of cases, these figures develop the remarkable fact that the death-rate from typhoid fever in private practice is three times as high as it is in hospitals.

By means of this constant intercommunication between the local health officers and the State Board, it is on record that of the 168 towns in Connecticut, measles occurred in 146 of them; scarlet fever appeared in 114 towns; diphtheria in 106; typhoid fever in 121 different towns; and whooping cough in a large majority of the towns in the State.

There is no instance on record of the presence of these diseases in so many towns in the State in any previous year. But there are frequent records of many times the mortality from them.

The outbreak particularly of scarlet fever and measles in so many places was due largely to the mild type of the maladies. The light cases were not reported. The patients were too often kept under no restriction, but allowed their liberty to spread the infection wherever they chose to go. Yet in many towns the primary cases were so well cared for that no general infection spread from them. In this connection it should be stated that there are three attributes which specially distinguish all infectious diseases: 1st, they are each due to a special infection; 2d, they are communicable diseases; 3d, they all belong to the class of preventable diseases. Hence the efforts of the State Board of Health are more particularly directed to their restriction and prevention than to any other human maladies. The experience of the past year as indicated by the reports of the health officers affords the most convincing proof that they are preventable.

The evidence is convincing, beyond dispute, of the success attending the intelligent application of the known means of restriction and of the failures following their neglect.

The testimony of the health officers is, that whenever they had the ready and active coöperation of the communities they

This is a surprising result and if future observation should verify its truth, it is an interesting and highly important question—Why this difference?

Several suggestions occur which deserve close investigation. Can it be due to the personal character of hospital patients? Can it be due to more skillful treatment and better nursing in hospitals?

Can it be due to the general unfitness, in a hygienic sense, of private houses, for the care of patients with a severe and protracted disease? Or do all these and still other influences combine to produce this favorable showing for hospitals?

♦♦

served, were promptly notified of the primary cases, and the directions which they gave were followed, in each instance the disease was arrested, or restricted to very limited numbers. On the other hand, the same testimony shows that wherever the isolation of patients was resisted and disinfection neglected, the diseases became more or less epidemic.

Upon the lowest money estimate of the cost of sickness and funerals, it would be easy to demonstrate that the prevention of the spread of these diseases in the State during the year, through the organized work of its health officers, had saved to its citizens many times the annual expense of the State Board of Health.

The history of the wide prevalence of the above named infectious diseases proves in a forcible manner that they are preventable and that their spread has been prevented in a great many places in which they have appeared, and just in proportion as the means of prevention have been applied. It also proves the success of the system of combining vital statistics with the sanitary administration in use in Connecticut. And it is very gratifying to add the general and increasing approval of it by the citizens.

The success of the efforts at prevention is strikingly apparent when we examine the mortality tables. Although there were one or more cases of the above diseases present in more towns in the State than ever before in one year, yet the deaths from measles, scarlet fever, typhoid fever, diphtheria and croup were 142 less than the average annual number of deaths from the same diseases in the previous twenty years. This fact is the more emphatic because of the increased density of population since twenty years ago and also the more perfect registration of deaths than formerly.

Sanitary administration is better than it ever was before, and there are still other means of improving it.

Our method of collecting the vital statistics enables us to record with great accuracy several other interesting and important facts, thus: there were 20,395 births in the State in the year ending October 31st, 1900; there were 7,024 marriages and 16,263 deaths, and of the last, 10 per cent. were caused by pneumonia.

On the basis of the census there were 22.4 births in every

1,000 of the population; there were 15.4 marriages to every 1,000, and the death-rate was 17.9 per 1,000.

There was one case of small pox in Danbury in July, and two cases of questionable diagnosis, called varioloid, in New Haven in March.

The State Board has published circulars giving instructions for the prevention and restriction of the recognized preventable diseases, which are liberally distributed whenever it is notified of the occurrence of them.

The State Board, through its Secretary or a committee, have responded to many requests for conferences with local health officers and with town committees in many different parts of the State. They have advised as to conditions suspected to endanger the public health; the abatement of nuisances, and the disposal of sewage. They have inspected and rendered advice respecting polluted lakes and rivers. The Secretary has had many personal consultations and much correspondence with local health officers relating to practical ways of arresting the spread of diseases. Public institutions have been visited and consultations held with local authorities in regard to improving their sanitary condition. Outbreaks of epidemic diseases have been investigated by experts and their origin discovered. The school houses throughout the State and the public buildings have been inspected by the local health officers and reported upon. Most of the sources of ice supply have been examined with reference to danger of pollution. On all the above matters, written reports have been made to the Board, which will appear in subsequent pages of this report.

In another way the work of the Board has been kept before the public in the issue of a "Monthly Bulletin," in which it published a concise statement of the births and marriages happening among the people and of the sickness and mortality in the State during the previous month, and the prevailing meteorological conditions. This is mailed to all health officers, town clerks, members of the Legislature, and all others who desire it. Its contents also gain a wider reading through the daily press, to which it is freely distributed, and which quote from it very liberally.

REPORTS OF LOCAL HEALTH OFFICERS.

There are 168 town health officers in the State, of which 159 have made report of their doings and of such facts relating to the hygiene of their respective towns as the State Board have inquired for. The prompt and generally satisfactory character of the reports as to the information communicated, denotes an intelligence and interest in their duties never so fully manifested before.

The health officers of Bloomfield, Branford, Chatham, Durham, Middlefield, Putnam, Southington, Waterford and Westbrook, have sent no report.

Besides the towns there are 18 cities. The health officers of two, Putnam and Rockville, have failed to report. Of the 22 boroughs, reports have been received from all but 3. Of 2 of these boroughs the health officers are recently deceased.

In several instances the city and town limits are coterminous and the same health officer has jurisdiction. So in all but 3 of the 22 boroughs, the health officer of the borough is the same person as that of the town in which the borough is included.

Many of the reports show that the writers are well founded in the principles of sanitary science. Every one who reads them attentively must be impressed with the feeling that there is, throughout Connecticut, a vigilant and intelligent supervision over those conditions which chiefly concern the health of its citizens.

Abstracts from all these reports and in some instances the full reports are published in the subsequent pages of this volume.

These annual statements present a continuous history of the progress of practical public hygiene in each town reporting.

In order that the reports shall have some uniformity of method, a series of topics are suggested to the health officers, covering the principal subjects which influence general salubrity and which the writers are requested to report upon in the order given.

For economical reasons, many details are omitted in the printed abstracts, such as the enumeration of diseases which did not occur in a town, the continued neglect to provide isolation hospitals or a public water supply or sewage disposal.

So, too, in regard to restricting tuberculosis, the printed reports quote only instances in which some definite action has been taken either by the medical profession or the public.

For the same economical reasons methods of garbage and sewage disposal, and provision for the care of contagious diseases, unless specifically described as an improvement on previous conditions, are not printed. In short, negative statements indicating no advance in public sanitation are generally not included in the printed abstracts.

ABATEMENT OF NUISANCES.

The practical work accomplished in the abatement of nuisances dangerous to health, is one of no small significance. These have been investigated by the local health officers to the number of many hundred, of which almost all were abated. Of these more than four-fifths were brought to the notice of the local health officers by complainants and the remainder were abated without waiting for a complaint.

The annual reports of health officers reveal the fact that in a few towns in the State, a rule is in force that every complaint of a nuisance must be made in writing and with the signature of the complainant. The State Board of Health is of opinion that this rule is inconsiderate and prejudicial both to the physical and moral health of the public subject to it. If the health officer is governed by it strictly, and will give attention only to nuisances which are brought to his attention in that way, the operation of the rule will cause many serious nuisances to be tolerated beyond the line of safety, or else will oblige neighbors to complain of each other, and so provoke irremediable personal animosities. Scarcely any rule can be devised so likely to perpetuate nuisances, and endanger health, or else interrupt the friendly relations of citizens and introduce discord into harmonious neighborhoods.

No citizen should be compelled to complain of his neighbor in order to have a nuisance abated, that is dangerous to the health of his family. The reluctance with which it is done, is sufficiently evident from the frequent requests of the complainants that their names shall not be made known.

Although there are several towns of which it is stated no

nuisances were complained of, yet it is quite evident from the other reports that there are very few towns indeed, probably not one, in which the negligence or indifference of some of its citizens have not produced unsanitary conditions, which ought not to be allowed to continue.

Another fact is conspicuously prominent in the annual reports of local health officers, which is that a very large majority of nuisances abated were first brought to the attention of the health officer in the form of a complaint, by a suffering neighbor. The inference is indisputable that innumerable others exist of which no complaint is made, because the neighbor prefers to suffer rather than offend his friend.

Among the official functions of the local health officers, the abatement of dangerous nuisances has always constituted a prominent part of his duties. Indeed, in public estimation, his works runs almost entirely in two lines, one the effort to restrict the spread of contagious diseases and the other the correction of unsanitary local conditions, commonly called nuisances. One is a direct contest with disease itself, the other a struggle with the agencies and influences which originate or promote disease.

The administration of public hygiene is often called "preventive medicine." The idea of prevention, the warding off of disease, is the highest aim of sanitary science. From this point of view it is evident that the true interest of a community requires that the abatement of dangerous nuisances should not be limited to those only of which complaint is made to the health officer, but that all the other dangerous nuisances should also be abated. This can only be accomplished by a careful and systematic inspection of all suspected places, at such intervals as circumstances may require.

Just here a practical difficulty arises in the present system of sanitary administration. The local health officers are, with few exceptions, practicing physicians. Their professional duties are too exacting to permit them to give the necessary time for a careful and methodical sanitary survey of the territory under their respective jurisdictions. Again, the economic ideas of most bodies of selectmen would seldom consist with the just charges of physicians so employed. Still again, it is not in accord with the present teaching of sanitary science that

a doctor should visit a sick patient while his clothing may be saturated with the disgusting odors derived from a recent inspection of a privy vault or a hogpen. Hence he cannot decently or rightly dovetail together his two functions of doctor and inspector on the same day. As chemists say, they are incompatible.

The solution of the problem lies in the employment of a sanitary inspector. Such a person, sufficiently intelligent for such work, under the direction of the health officer, to whom he should report daily, could always be employed at much less compensation than would satisfy the doctor. The moral effect of announcing a proposed inspection of back-yards and dirty places, would cause a hasty and efficient renovation of many of them before the inspector appeared.

By this plan two very desirable results would be accomplished, the greater part or all of the unwholesome nuisances would be abolished and personal animosities among neighbors, caused by complaints, would be avoided, and the sanitary results would be far more satisfactorily accomplished. Such inspection should be made at intervals, as circumstances might require.

TUBERCULOSIS.

The reports relating to special efforts for the restriction of tuberculosis reveal a general recognition of the importance of such efforts, but do not indicate any common or united activity. No doubt much is being accomplished in a quiet but effective way by the personal and private instructions given by practitioners generally to their patients and nurses as to the proper precautions to observe with consumptives. This practice is frequently mentioned in the reports. In some towns, especially those in which the trolley cars are running, the local health officers have issued a prohibition against spitting upon the floors or platforms of the cars and in most cases have extended the mandate to include all public buildings and the sidewalks.

As the dried spittle of consumptive patients is believed to be the principal medium of communication, the reformation in the practice of spitting which will be effected by such sanitary regulations as the above, will unquestionably reduce the victims of that dread malady.

Tuberculosis is not only a preventable disease, but in its incipient stages it is unquestionably curable. But the peculiar nature of the disease and the circumstances of many of its victims are such that the expense of proper treatment is prohibitory, even for people of considerable property, in the absence of any suitable establishments in which they can be received and cared for. Hence the majority of consumptives have only the discouraging prospect of laboring on while their strength lasts in the same unsanitary environment in which the disease was acquired.

There are a goodly number of consumptives now living in this State who under favorable conditions could be restored to health. The conditions necessary to so happy a result, however, are not available to them as individuals, except that by some public benefactions, provision is made for their care and treatment collectively. The plea is specially made for the poor, who because of their poverty will of necessity continue to live in overcrowded habitations and in an environment most unfavorable to the recovery of such patients. Unfortunately the majority of tuberculous patients are poor.

The plea for sanatoria for consumptives is not made solely in the interest of the victims of the disease, but more largely in the interests of the general public.

Everyone of these poor patients is by reason of his circumstances unavoidably and inevitably a source of infection to others. Those who are associated with him in the intimacy of family life can rarely escape the fatal consequences of such association, and thus they in turn become new centers of future infection to their companions. Every state owes it to its subjects, as a measure of great public concern, to diminish as much as possible the breeding places of this most deadly of all human maladies.

This proposition to provide, at the public cost, the means of caring for and treating the indigent victims of consumption, is not a fanciful and novel conceit of visionary enthusiasts. In Europe the practice has passed the experimental stage, and has demonstrated its claim to wise, prudent and economical statesmanship. The Czar of Russia, the Emperor of Austria, the Kings of Saxony and Sweden, the Queen of Holland and the Empress of Germany, have provided in greater or less degree

this sort of contribution to the welfare of their peoples. "Germany alone, ten years ago, could boast of over thirty sanatoria for the consumptive poor." The number is now nearly doubled.

Among the advocates of these institutions are found the highest sanitary authorities known: Von Schrötter of Austria; Dettweiler, Leyden and Liebe of Germany; Letulle, Grancher and Petit, of France; Walters, Weber and Lindsey, of England; and in this country, we have Prudden, Biggs and Knopf of New York; Bowditch and Otis of Boston; Lee and Flick of Philadelphia, and many others.

The longest experience of consumptive hospitals has been had in England. It is sufficient to mention the Brompton Hospital and the Royal Hospital for Diseases of the Chest; both of which were inaugurated about half a century ago. Still others antedated them. One, indeed, was established as early as 1791—the Royal Sea-bathing Infirmary for Scrofula.

The first hospital in the United States for the treatment of consumption was started by the private enterprise of Drs. A. L. Loomis and E. L. Trudeau, with the benevolent aid of a few ladies and gentlemen in New York and Philadelphia. It was located in the Adirondacks near Saranac Lake in 1884. It is conducted on the cottage system.

In 1887 the Philadelphia Protestant Episcopal Mission established a hospital for the treatment of consumption at Chestnut Hill. The next year a private sanitarium for the same purpose was erected at Asheville, N. C., the Winyah Sanitarium. Still others have been established, stimulated by philanthropy or as a profitable business venture. There are now 35 such establishments in the United States, including some military ones. But Massachusetts, accustomed as she is to lead in such beneficial undertakings, was the first state in the Union to establish, by an act of Legislature, a hospital for consumptives; as a result of which the State was able to announce that on the first day of October, 1898, the hospital would be open for the reception of patients.

But after all the practical question is *cui bono*, for what good are they?

They have demonstrated their usefulness very positively in three distinct ways: (1) They have proved beyond question

the curability of the disease and the means of curing. (2) For ever patient treated in them one source of danger has been removed from the community in which he lived. (3) They are object lessons and practical schools of public instruction, the teachers being in large part the recovered patients, who go back to their friends, living illustrations of the fallacy of the old belief that consumption is incurable. But better than that, they are well instructed by personal observation and practical experience in the special precautions and conduct which they must observe both for their own safety and that of others.

Dr. Flick of Philadelphia, in a very full review of the "Special Hospital for the Treatment of Tuberculosis" existing in Europe and in this country, writes that in England the deaths from tuberculosis have diminished 50 per cent. in the forty years from 1849 to 1888, inclusive. He attributes this result very largely to the good influences of the hospitals devoted to the treatment of that disease.

The State Board of Health desire, in this connection, to express in strong terms its approval of any act of our Legislature looking to the establishment of a hospital for the treatment of the consumptive poor, erected and conducted on modern scientific principles in laudable imitation of similar institutions in the states of Massachusetts and New York.

Tuberculosis is at the present time occupying more public attention, and exciting a greater interest in the popular mind, than any other single sanitary topic.

The simplicity of the mode of its communication, and the efficacy and practicability of avoiding the danger of taking it, gives great encouragement to the belief that it can be almost or quite exterminated. The State ought not to be backward in affording all reasonable aid it can render.

It is stated on a previous page that there are other ways in which sanitary administration in Connecticut can be improved.

There are three which stand out prominently, as means of much utility and proven efficacy. One is the providing for gratuitous examination of pathogenic specimens of matter from suspected cases of infectious diseases, in order to secure an early diagnosis and prevent their spread. Another is the daily inspection of school children. The majority of epidemics spread from schools. The early detection of the primary cases

and their prompt removal would prevent such a development. In practice, too, it has been found of great value to the health of the children in detecting many ailments in a curable stage which are being neglected to the serious injury of the children—such as varieties of skin diseases, inflammations of the eyes and ears, the presence of parasites, and deformities, all of which become aggravated by neglect. And thirdly, it would be of inestimable value in the prevention of epidemics if the State Legislature should enact a law that every city and every town of more than 5,000 inhabitants should provide and keep ready for use an isolation hospital, to which contagious cases that have no adequate means of isolation could be taken and cared for.

Much might be said in advocacy of each of these means of promoting public health, but for the present they are only offered as suggestions.

The following is a brief statement of the work done in water investigation :

First—The examination at regular intervals of certain public water supplies in the State.

Second—The examination of the water from certain rivers which are subject to sewage contamination.

Third—The examination of the efficiency of sewage purification works.

Fourth—The examination of special samples ordered by the County Health Officers.

Samples have been taken at stated intervals from fourteen different public water supplies throughout the State during this year. The analyses of this class are highly important as tending to stimulate those having charge of the supplies to make improvements; this effect being accomplished by the knowledge that the character of the water is to be compared with that of other places, in the analyses published in the annual reports. The effect aimed at here is similar to that of the law under which all fertilizers used in the State are analyzed, and which has resulted in maintaining an excellent standard in the products of this class which are sent into the State. It is very desirable that a greater number of analyses should be made each year than has been found possible. In Massachusetts every supply is examined several times each year.

The rivers which have been examined during the past year

are: the Housatonic, samples having been taken at Falls Village and at Derby each month throughout the year; and the Hockanum, from which samples have been taken monthly from three places throughout the dry season. Analyses of this class are of special value as tending to keep track of the increasing sewage pollution of our streams, and as giving definite data when such questions come up for consideration in our courts.

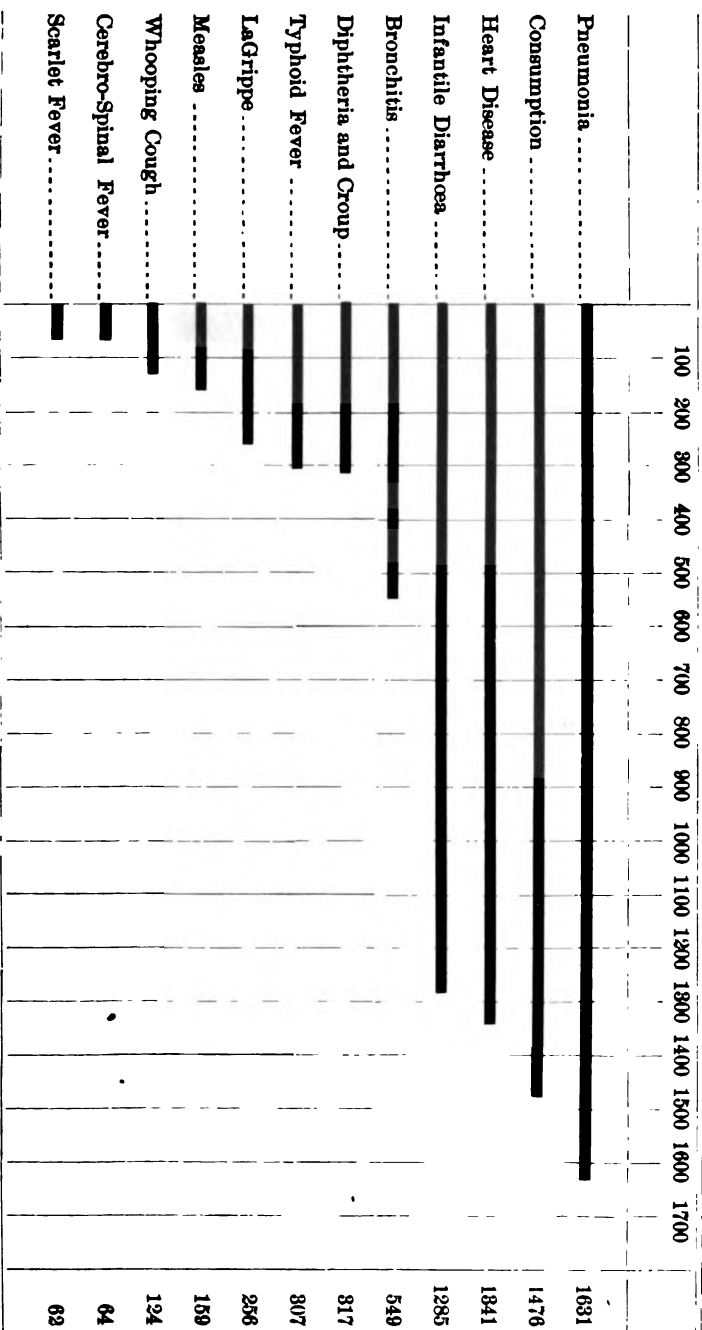
The sewage samples which have been examined during this year have been taken from the new filter beds at the Springside Home in New Haven, as they have been in former years from the Meriden and Bristol filter beds. The increasing pollution of certain of our streams is making it more and more necessary to purify the sewage of our cities in some manner, and the process by intermittent filtration is the one which seems best fitted to our conditions. In order to get satisfactory results from filter beds they require intelligent care, and experience has shown that this is best accomplished by a certain amount of outside oversight; and it would, therefore, be very desirable if the State Board of Health were in a position to look after the workings of all such beds in the State, by inspection and by analysis of samples.

The special examinations made by order of the County Officers are for the most part the examination of wells suspected of being the source of disease. These have increased considerably as compared with last year, there having been sixty-five chemical or bacteriological examinations of this class so far this year. This class of analyses is of very great service, for the waters examined are those which are a special menace to the health of the State, and the analyses by the State afford the health officers a good basis, when taken in connection with their knowledge of the surroundings, on which to form a definite opinion as to whether the source should be discontinued. It is reasonable to expect that for a time the number of such analyses will increase.

Respectfully submitted,

WM. H. BREWER,
C. A. LINDSLEY,
H. G. WILSON,
R. S. GOODWIN,
T. H. MCKENZIE,
E. K. ROOT,
H. G. NEWTON.

DIAGRAM SHOWING THE RELATIVE MORTALITY FROM THE LEADING DANGEROUS DISEASES, IN 1900.



Three cases of Small Pox were imported into the State during the year. Two were found in New Haven and one in Danbury.

SECRETARY'S REPORT.

By C. A. LINDSLEY, M.D.

SECRETARY'S REPORT FOR 1900.

MEETINGS OF THE BOARD.

QUARTERLY MEETING.

NEW HAVEN, CONN., Jan. 13, 1900.

The regular quarterly meeting of the State Board of Health was held this day, after due warning, at the office of the Secretary at New Haven.

The meeting was called to order at 2.35 P. M. by the President, Prof. Wm. H. Brewer. There were present: Dr. G. H. Wilson, Dr. R. S. Goodwin, Dr. E. K. Root, Attorney H. G. Newton, and Dr. C. A. Lindsley.

The minutes of the last meeting were read and approved.

The report of the Treasurer for the quarter was read, approved, and ordered on file. The vouchers had been previously audited and approved by the Auditing Committee.

The Secretary made a verbal report of the work of the Board during the quarter, and of the general condition of the health of the commonwealth; noting by comparison with mortality reports of former years a decided improvement; this improvement being manifest in regard to the percentage of infectious diseases, but particularly in regard to the diminished deaths from typhoid fever.

The different medical societies of the State having sent in their respective nominations for the examining committees, the Board proceeded to their appointment in the following order.

Following the announcement of a nomination of a committee-man by the Connecticut Medical Society came a letter from the nominee, forwarded by the Secretary of the Society, declaring his purpose to decline the appointment as soon as he has been officially notified of it.

The Secretary of the Medical Society had also informed the President of the Society, Dr. C. S. Rodman, of this purpose on the part of the candidate. The President of the Society, acting

on this information, sent the following communication to the State Board of Health:

CONNECTICUT MEDICAL SOCIETY, PRESIDENT'S OFFICE.

WATERBURY, CONN., Jan. 9, 1900.

PROF. C. A. LINDSLEY, *Secretary*.

Dear Doctor:—Having to-day received notice from the Secretary of the Connecticut Medical Society that Dr. Graves declines to accept appointment upon the Examining Committee, and acting in conformity with Section VI of the Medical Practice Act, I nominate Dr. W. L. Barber of Waterbury to fill the vacancy.

Yours sincerely,

(Signed) C. S. RODMAN.

The correspondence having been submitted to the Board and considered, it was voted, that

Whereas, Dr. C. B. Graves, who was nominated by the Connecticut Medical Society as a member of its Examining Committee, has given notice that he will not accept an appointment as a member of said Committee, and whereas the President of said Society has nominated Dr. Walter L. Barber, of Waterbury, to fill the vacancy thereby caused, Dr. W. L. Barber be and hereby is appointed a member of said Examining Committee.

A communication from the Secretary of the Connecticut Homeopathic Medical Society announced the name of Dr. E. C. M. Hall of New Haven for appointment on its Examining Committee. On motion it was

Voted, that Dr. E. C. M. Hall be and is hereby appointed a member of said Examining Committee.

A like communication from the Connecticut Eclectic Medical Association nominated Dr. Leonard Bailey to succeed himself on its Committee. It was voted that Dr. Leonard Bailey of Middletown be appointed on said Committee.

A communication from the State Board of Health of Illinois was presented, relating to reciprocity between states in permitting medical practitioners who have passed satisfactory examinations in one state to enter into practice in another state, where the requirements of qualifications are the same, without a re-examination.

The communication was referred to a committee consisting of Drs. Root and Lindsley, to consider and report what change,

if any, in legislation in this State was advisable in reference to this subject.

Several other communications were read and duly considered, but they did not call for any formal action on the part of the Board.

A communication from the Secretary of the Conference of State and Provincial Boards of Health of North America was laid upon the table until the April meeting.

Dr. Root stated that the question of excluding pupils from the public schools who were afflicted with animated parasites upon the head or body, had arisen in Hartford, and he desired an expression of the Board upon it. After consideration it was

Voted, that it is the opinion of the State Board of Health that lousy pupils should be excluded from the public schools.

Dr. Root submitted some notes of information he had obtained relating to the last autumn of over 40 cases of typhoid in South Manchester.

The Secretary announced that he had received official information of the organization of a "Superior Board of Health of Porto Rico," with the names of the officers and members.

He had also forwarded to it copies of our reports and other documents.

No other business offering, the meeting adjourned.

Attest: C. A. LINDSLEY, *Secretary*.

QUARTERLY MEETING.

NEW HAVEN, CONN., April 27, 1900.

The regular quarterly meeting was held this day after due notice, at the office of the Secretary at New Haven. It was called to order at 2.35 P. M. by the President, Prof. Wm. H. Brewer. There were present: Dr. G. H. Wilson, Dr. R. S. Goodwin, T. H. McKenzie, Esq., Dr. E. K. Root, H. G. Newton, Esq., and Dr. C. A. Lindsley.

The minutes of the last meeting were read, amended and approved.

The Report of the Treasurer having been audited by the Committee, was read, approved and ordered on file.

The Report of the Secretary for the previous quarter was read, approved, and ordered on file.

Voted, that 300 copies of the revised edition of Disinfection and Disinfectants, to be published by the American Public Health Association, be purchased and one copy sent to every health officer in the State.

A communication from Dr. E. K. Root, dated Feb. 12, 1900, stating that an analysis of the water sold by the Diamond Bottling Co. of Waterbury showed a high degree of contamination, was submitted together with the correspondence of the Secretary with the health officer of Waterbury on the matter.

A communication from the National Board of Trade, asking the influence of the State Board of Health in support of a bill prohibiting the pollution of streams, where such streams form the dividing lines between two States. Connecticut not being interested in the subject, having no such boundaries of extent, the matter was by vote laid on the table.

Communications from parties soliciting exhibits by the State Board for the Paris Exposition and for the Pan-American Exposition of 1901, were by vote laid upon the table for future consideration.

The appointment of delegates to the Conference of State and Provincial Boards of Health of North America, laid upon the table at the last meeting, was taken up, and Dr. C. A. Lindsley and Dr. E. K. Root were appointed to attend the meeting to be held at Atlantic City, June 1 and 2.

It was further

Voted, that if either delegate was unable to attend, he might appoint a substitute.*

A communication from James H. Sutherland of Clinton, concerning an alleged nuisance near his milk house, was submitted, also another relating to the same from Judge W. U. Pearne. The matter was referred to a committee consisting of Attorney H. G. Newton and Dr. Lindsley.

The matter of employing more clerical assistance in the office while compiling the annual Registration Report was stated by the Secretary, and he was instructed to employ another clerk.

No further business offering, the meeting adjourned.

Attest: C. A. LINDSLEY, *Secretary*.

* Dr. Root appointed Dr. Goodwin his substitute.

SECRETARY'S REPORT

FOR THE QUARTER ENDING MARCH 31, 1900.

The mortality in Connecticut during March.

The total deaths in March numbered 1,691, which is unprecedented in any one month since January, 1892, when the total deaths reached 1,953, the highest that ever occurred in the State. The March mortality was 262 in excess of the previous month's death roll. It is interesting to compare the record of January, 1892, with that of March, 1900. In each of these months pneumonia was by far the most destructive to human life and the most prominent cause of the excessive mortality.

If we examine the records previous to 1890, it will appear that the average annual mortality from pneumonia for 13 years was 776, varying but little from that figure, excepting a gradual increase from the earlier years with the increasing population.

Now if we examine the records since 1889 to the end of the year 1899, we find that with the beginning of that decade there was a marked increase of pneumonia in the winter and spring months. In all the previous history of the State, the deaths from pneumonia had only twice reached 200 in a single month. But in January, 1890, the fatality was 416 from pneumonia. And we find the record shows that during the decade 1890 to 1899 inclusive, the average annual mortality has been 1,296—instead of 776 of the previous 13 years.

It clearly appears from the registration of the vital statistics of Connecticut, that some radical change took place in the winter of 1889 and 1890, producing a marked increase in the fatality of pneumonia and other acute inflammations of the air passages.

It will be remembered that the first epidemic of influenza or la grippe that had occurred in this country for many years began in December, 1889. In the following January there were 416 deaths in Connecticut ascribed to pneumonia and 83 to la grippe. Previous to that winter influenza had seldom been recognized as a cause of death, but during the last decade, 1890 to 1899, the average annual deaths from influenza were 260.

The number has varied considerably in different years from 118 in one year to 564 in another, and it is noticeable that the varying mortality from pneumonia is closely in accord with the mortality from influenza. Pneumonia has been most fatal always in the same months in which influenza has been most

prevalent. In March last, the deaths ascribed to influenza numbered 128, a number which has never been equalled in any previous single month in Connecticut, and the deaths from pneumonia numbered 307, a number which has not been surpassed since January, 1892.

Although measles has been very generally present in the State for several years, there has been a remarkable increase in its prevalence and fatality during the last month. It was reported as present in 98 towns in the State, and contributed 32 to the death roll. There were 1,249 individual cases reported besides those towns in which it was only reported as epidemic. It is probable there are several thousand cases in the State.

There is then apparently some intimate relationship between influenza and the other diseases which have simultaneously been increased and aggravated. Influenza, pneumonia and measles are all infectious diseases affecting most conspicuously and energetically the air passages.

Influenza is especially distinguished for the rapidity and suddenness of its attack upon communities, and the wide difference of the infection over great spaces of territory. It is also remarkable for the severe debility and prostration it produces in its victims.

It is a fact long recognized among physicians that a person in vigorous health, and in the normal exercise of all his functions, is capable of resisting the action of infectious germs and seldom suffers from them, but if by any influence his resistive powers are impaired he becomes susceptible, and the more they are impaired the less his chances of recovery.

Connecting all these facts together with the obvious train of thought which they suggest, it would seem that the renewed prevalence of epidemic influenza had not only rendered an excessively large number of people susceptible to pneumonia, bronchitis, broncho-pneumonia and measles, many of whom would have resisted those diseases, but it has also greatly reduced their powers of endurance and so made them more fatal.

Apparently these disease germs have adopted the practice of the times and formed a trust, and with characteristic energy are making a united assault upon the lungs and other vital organs of poor humanity.

Respectfully submitted,

C. A. LINDSLEY, *Secretary.*

ANNUAL MEETING.

NEW HAVEN, CONN., July 11, 1900.

The annual meeting of the State Board of Health was held this day after due warning.

The meeting was called to order by the President, Prof. Wm. H. Brewer, promptly at 2.35 P. M. There were present: Dr. G. H. Wilson, T. H. McKenzie, C.E., Dr. E. K. Root, H. G. Newton, Esq., and Dr. C. A. Lindsley.

The minutes of the last meeting were read, approved, and ordered on file. Treasurer's report read and approved.

It being the annual meeting of the Board, and the election of officers for the ensuing year being in order, the following officers were chosen:

For President—Wm. H. Brewer.

For Treasurer—Chas. A. Lindsley.

For Auditors—H. G. Newton and T. H. McKenzie.

For Managers of County Temporary Homes for Indigent and Neglected Children—For Hartford County, Dr. E. K. Root; for New Haven County, Prof. Wm. H. Brewer; for New London County, Dr. G. H. Wilson; for Fairfield County, Dr. C. A. Lindsley; for Windham County, H. G. Newton, Esq.; for Litchfield County, Dr. R. S. Goodwin; for Middlesex County, Dr. E. K. Root; for Tolland County, T. H. McKenzie, C.E.

A verbal report of the Secretary for the previous quarter was presented and accepted.

The report of the Committee on the hogpen nuisance at Clinton was read, and the complainant being present, was presented to the Board and made a statement of the situation, and of the exposure to which he has been subject for the past two or three years.

On vote the matter was referred back to the committee to inquire of Mr. Pearne, the County Health Officer, and of the local health officer, Dr. Reynolds, exactly what steps had been taken in the matter and what the present situation is.

The Secretary announced the result of the investigation of the Forestville epidemic of typhoid fever. That the origin had been conclusively traced to the public water supply, which was contaminated by the excreta from the privies connected with a

large factory. The full report will be published with the Annual Report of the Board.

The Secretary announced the resignations of two County Health Officers, to wit: Myron P. Yeomans, Esq., of Tolland County, and Chas. F. Thayer, Esq., of New London County. It being the duty of the State Board to nominate to the Governor candidates for these vacancies, the Secretary presented a number of letters from prominent citizens of the State recommending different persons as well qualified for such office.

Before proceeding to nominate, it was voted to go into executive session.

After deliberate consideration of all the candidates and the recommendations of them, the Board made the following nomination:

For Tolland County—Edw. M. Yeomans, Esq.

For New London County—Edwin W. Higgins, Esq.

No further business offering, the meeting adjourned.

Attest:

C. A. LINDSLEY, *Secretary*.

QUARTERLY MEETING.

NEW HAVEN, CONN., October 13, 1900.

The regular quarterly meeting of the State Board of Health was held this day after due warning, at the office of the Secretary at New Haven.

The meeting was called to order at 2.37 P. M. by the President, Prof. Wm. H. Brewer. There were also present: G. H. Wilson, M.D., T. H. McKenzie, C.E., H. G. Newton, Esq., E. K. Root, M.D., and C. A. Lindsley, M.D.

The minutes of the last meeting were read, amended and approved. Treasurer's report was read and approved. A brief verbal report of the Secretary was made and accepted.

On motion of Mr. Newton, it was

Voted, to recommend to the Comptroller, payment of bill for rent of office occupied by the Board, for the year ending Sept. 30, 1900.

A communication was presented from C. E. Hoadley, Esq., County Officer, requesting the Board to visit and report on the present conditions of the Wepawaug River at Milford, with regard to its influence upon the public health.

On motion it was

Voted, that the Secretary of the Board with such other members as would accompany him, be a committee to make such inspection and report.

A communication from Dr. Max Mailhouse was read, announcing his resignation as a member of the Examining Committee on the part of the Connecticut Medical Society. Also a communication from Dr. Leonard B. Almy, President of the Connecticut Medical Society, nominating Dr. Charles A. Tuttle for the unexpired term of Dr. Mailhouse, resigned.

On motion it was

Voted, that Dr. C. A. Tuttle, of New Haven, be and is hereby appointed a member of the Examining Committee for the Connecticut Medical Society, for the said vacancy.

A communication from the Rev. Prof. Samuel Hart of Middletown was received, relating to the excessive frequency of illegitimate births in Hartford during the year 1899, and suggesting that the Board undertake an investigation of the cause of it.

On motion, Dr. E. K. Root, of Hartford, was unanimously appointed a committee of investigation.

A report by Professors Brewer and Lindsley of the unsanitary condition of Lake Quonnipaug in North Guilford, was read and ordered on file.

A report of a discreditable method of disposal of garbage in the city of Derby, was read by the Secretary.

The Secretary reported an interview (at the request of the local health officer of Lyme) with a number of its prominent citizens, to explain to them the practicability and means of preventing the spread of scarlet fever, of which there were several cases in one family. The alarm of the public was due to the fact that the disease was in the family of the editor and publisher of the village paper, and that the printing, wrapping and mailing of the paper was done in the house.

The Secretary reported that he had attended as a witness a public hearing on the Clinton hogpen and milk house case, before County Health Officer W. U. Pearne, Esq., to decide about sustaining the order of the town health officer, for the removal of a hogpen in close proximity to a milk house and a dwelling.

The Secretary announced that the annual meeting of the American Public Health Association would be held at Indianapolis in the latter part of the month. The following delegates were appointed to attend: T. H. McKenzie, C. A. Lindsley, R. S. Goodwin, and G. H. Wilson.

The following members were appointed as a Committee on Legislation to look after the interests of the State Board in the next General Assembly: Prof. Brewer, H. G. Newton, Esq., Dr. Root and Dr. Lindsley.

Voted, that the next meeting of the Board shall be called at 5 o'clock P. M.

No further business offering, the meeting adjourned.

Attest:

C. A. LINDSLEY, *Secretary*.

The minutes of meetings of the State Board of Health are in evidence that the sanitary administration in the State has become so systematized, that the duties of the Board as a body have become very routine in character. It has held its regular quarterly meetings and given due attention, and when needed judicious direction, through its executive officer, to the undertakings in hand.

The best exhibit of what is being accomplished to preserve and promote the health of the people of the State, will be found in the annual reports of the Town, City and Borough Health Officers.

One hundred and ninety-three separate and distinct reports have been made to the State Board by these local health officers for their respective jurisdictions.

Each report briefly summarizes the prevailing state of health throughout the past year, mentioning particularly the diseases which have been most prominent, especially those of an infectious nature. When known, the source of the infection is stated and the manner of its invasion. Also, the means which have been tried for controlling such diseases, and the measure of success attending the efforts.

In no line of applied sanitary science has more profitable, intelligent and effective progress been made and more satisfactory results achieved than in the application of the recognized methods of arresting and preventing the spread of infectious

diseases. This success has been conspicuously progressive since the local health officers have had their terms of office extended to four years, and are no longer dependent upon the popular vote for reappointment.

Accompanying this improvement, and as an important part of it, is the radical change in the public mind, in its relation to this and almost every other question of public hygiene. As contrasted with the feeling a few years ago it may be described almost as a reformation. It is exceedingly encouraging to find so many of the health officers taking occasion in their reports to express their thanks to their constituents for their coöperation, in the discharge of their official functions.

TUBERCULOSIS.

There is a general agreement in the responses to the inquiry as to what is being done to restrict the prevalence of tuberculosis in the State, that besides the enactment in many towns of a regulation prohibiting spitting in public places, a very general and commendable custom prevails among physicians of instructing patients and nurses having charge of them, as to the necessity and means of destroying the sputa.

To the question—Have any cases of tuberculosis been traced to the feeding with tuberculous milk? the answers are still all in the negative.

Inasmuch as during the past three years, nearly 500 children under five years of age have died of some of the forms of tuberculosis, many of them of *tabes mesenterica* or tubercular meningitis, and as it is so generally believed that such victims do often acquire the disease through infected milk, the inference is reasonable that diligent inquiry would have traced some of the above cases to that source of infection.

THE SCHOOL HOUSES.

An excellent service has been done the State through the local health officers, in making an inspection of the sanitary condition of the school houses. One would infer, however, from the reports that in most cases it has been but one annual inspection, and that too, after timely warning, at the end of

summer vacation, when all self-respecting school boards would have had things looking at the best. But even under such circumstances, much in the way of cleaning and repairing was found to be necessary. The one inspection has evidently accomplished much good, but the benefit would be multiplied if it was repeated a few times during school sessions.

To illustrate—In one report it is written: "I find the public school in good condition, neat and clean." A few weeks afterwards, the Secretary had occasion to visit that village and interview the health officer on other matters, and took occasion to visit with him the public school outhouses. The nastiness of the place was beyond description in any words fit to print. The conditions present were in our experience unparalleled in their indecent and disgusting offensiveness.

We were induced to make the inspection in seeking and finding here the source of a stench, strongly perceptible, in the main street of the village. There were said to be about 500 pupils of both sexes in this school.

Every public school should be under the observation and authoritative direction, as to house-keeping, of a committee of ladies, whose duty it should be to inspect the school and surroundings once a week, during school sessions. An annual inspection is useful chiefly in proving the need of making them oftener.

MILK.

In regard to the milk traffic and the purity of the supply furnished to customers, the answers present great diversity of statement and opinion. Some of the reporters seem to have that childlike and unquestioning confidence in what their neighbors furnish, that a baby has in its own private supply, and declare that the milk produced in their locality is perfectly pure. But it is very encouraging to know that the trend of the testimony is towards a general improvement all along the line in the care of cows as to housing and feeding, the care of the milk to protect it from contamination, and a better knowledge among dairymen as to what is necessary to the accomplishment of these purposes. The importance of the milk question is growing in public regard.

ICE.

Another very valuable service has been rendered by the local officers, pretty generally throughout the State, but most thoroughly in New Haven County. Reference is made to the investigation of the sources of supplies of ice for general distribution. The purpose was to discover what unsanitary conditions, if any, might exist in such proximity to ice ponds as to endanger the purity of the ice. The result of such inspection has been the finding of many sources of pollution, followed by their removal, or a prohibition of the sale of ice from such polluted sources.

SANITARY ENGINEERING UNDERTAKINGS.

The Guilford Water Co., it is reported, have well under way the enterprise to supply Clinton, Guilford and Madison, with a good and wholesome water from an inland lake near Clinton.

Manchester—The health officer speaks enthusiastically of the "magnificent sewer plant, built by the Cheney Brothers." An error in the estimate of the necessary number of filter beds has delayed the completion, but it is expected to be in operation before the end of the year.

Naugatuck—Two sewers in the town have been completed during the past year, and the borough has voted to lay another, to be known as the Rubber avenue sewer.

New Britain—Has plans for the construction of a sewage disposal system by filtration which, when completed, is expected to relieve the rivers of the pollution which they now receive from that city.

New London—The health officer reports that the citizens are appreciating more than before the advantages of public sewers. He calls it "a great change of sentiment." That the opposition to extending them has disappeared, and the petitions for more cannot be readily complied with, they are so frequent.

Norfolk—The Norfolk sewage disposal system, by intermittent filtration, which was begun in September, 1898, is approaching its completion. It has, indeed, been in active service for more than a year. The health officer reports the South arm completed during the past year. The whole work is said to be nearly finished.

Ridgefield—The health officer reports an "introduction of a water supply derived from driven wells, into the village, whereby is assured a supply of good wholesome water."

Plans have also been prepared for a sewage system and disposal plant, which are awaiting execution until the Legislature grants a charter for a borough, with power to carry into effect such undertakings.

Watertown—The health officer reports that "water is now being brought from the town of Bethlehem, and it is hoped and expected that it will be a perfect success."

Several new storage reservoirs have been built by the older water companies at Southington, Middletown, New Haven and Bridgeport.

In every part of the State the trend of the public mind is toward a higher standard of living, from a sanitary point of view, and to a more intelligent recognition of the fact that public health is in large degree a matter of public control.

It is appropriate to introduce here some correspondence and reports relating to the doings of the Board during the past year:

FORESTVILLE TYPHOID FEVER EPIDEMIC.

On the 19th of April the Secretary was notified by telephone of an abrupt outbreak of typhoid fever in Forestville, a suburb of Bristol. The local health officer, Dr. H. D. Brennan, said that every ordinary source of infection had been investigated, and with no satisfactory results. He said the drinking water had been analyzed by a chemist in Hartford, who reported it as "singularly free from any pollution of any kind, and perfectly safe to use for drinking."

Dr. Brennan requested the advice and assistance of the State Board of Health, as the suddenness and extent of the outbreak indicated some local cause which he thought it important to discover.

Responding to this request, the Secretary requested Prof. H. E. Smith, M.D., the Chemist of the Board, to visit Forestville, inspect the situation, and learn what he could. The result of Dr. Smith's investigation was most conclusive and satisfac-

tory, fixing the source of the fever in the drinking water without a shade of doubt.

His full report will be found in subsequent pages of this volume.

THE DIAMOND BOTTLING CO.

The following letters, which are self-explanatory, are very suggestive that there should be some constant oversight and authoritative control of the numerous and increasing private enterprises engaged in the bottling and dispensing of potable water alleged to be of superior purity.

It is a serious question if such venders ought not to be licensed, and the quality of their goods subject to official investigation.

HARTFORD, CONN., February 12, 1900.

My dear Doctor Lindsley:—An analysis of the water used by Diamond Bottling Co. of Waterbury, Conn., made by Mr. Henry Souther (Chemist for Pope's Mfg. Co.), shows a high degree of contamination. Moreover the sanitary conditions, I am informed, under which the water is obtained are very poor. As large quantities of this water is bottled and sold both as all sorts of "soft drinks" as well as water for drinking and table use, I suggest the propriety of an examination of the premises and an analysis of the water.

Yours truly,

EDWARD K. ROOT.

February 14, 1900.

My dear Dr. Root:—Replying to your favor of the 12th inst. I would say that I do not think the State Board has authority to take any active steps in this matter. The legislature has carefully refrained from giving the State Board any mandatory or prohibitive powers in regard to any condition however unsanitary or dangerous to public health. All authority in such cases resides in the local health officer.

I have written him, stating the facts which you have communicated to me, and asked him to give it his attention. I have also advised him to have samples of the water analyzed by Prof. Smith.

Very truly yours,

C. A. LINDSLEY, *Secretary.*

Health Officer's reply:

WATERBURY, CONN., Feb. 16, 1900.

PROF. C. A. LINDSLEY, *Secretary.*

Dear sir:—I will investigate the Diamond Bottling Co.'s works and report to you as soon as possible.

The water from the spring proper is used by all of the best families in this town. I have used nothing else on my table during the last

seven years. There must be a reason somewhere for this complaint. I will send sample to Prof. Smith.

Yours very truly,
C. W. S. Frost, *Health Officer.*

Subsequently in a personal interview, Dr. Frost said that the analysis he caused to be made confirmed that reported by Dr. Root, and that the use of water from that source had been wholly discontinued.

MERIDEN ALMS HOUSE.

The following is a report to the State Board of a visit of inspection to the town poor house of Meriden, in response to a request from a Meriden official.

NEW HAVEN, CONN., June 8, 1900.

To whom it may concern:—

Upon request of G. W. Miller, Esq., First Selectman of Meriden, the undersigned visited, this 8th day of June, 1900, the almshouse of the town of Meriden.

The purpose of the visit was to inspect the premises and belongings, to form an opinion, from a sanitary standpoint, of their fitness for the housing and care of the poor of the town.

The site is apparently salubrious, being highly elevated and commanding a wide prospect of the surrounding country, but the cellar of the house and the adjoining grounds are often wet from the out-breaking of springs, due to the still more elevated grounds in the rear of the buildings.

The inmates of an almshouse are not confined there in punishment for any offences against social order which they have committed, but they are our unfortunate fellow creatures, disabled by natural incapacity or bodily infirmities to care for themselves. A prosperous town has undertaken to provide for them in their extreme need. The dictates of humanity demand that they should receive kind and considerate treatment; that they should be comfortably and safely lodged; should be fed with wholesome and sufficient food, and kept under cleanly and healthy conditions. The question is, do the present accommodations meet these requirements? There can be but one answer and that is most emphatically in the negative. The buildings in their original construction and design were radically defective for the purposes of an almshouse, adequate to the wants of Meriden, and the defects are so great that their correction, by repair or alteration, short of entire reconstruction, is impossible. As well attempt to alter an old canal boat into a modern steamship. The place has greatly exceeded its limits of capacity for the proper care of three or four score inmates, of both

sexes. It has no suitable or even decent provision whatever for the care of the sick, nothing at all in the nature or semblance of a hospital. Every part of the establishment is over-crowded, and were it not for the scrupulous attention to cleanliness by the Superintendent and Matron, there would very soon be evidences of crowd-poisoning. As it is, any case of illness will be much aggravated and the chances of recovery diminished, by exposure to the present house conditions.

There are fourteen beds in the garret of the men's building, where there are only two windows for ventilation and where the roof is so near the floor that it is only possible to stand upright in the middle of the space. The air of that place in the morning would remind one of the Black Hole of Calcutta. In case of fire, the means of escape and the infirmities of the occupants, if it occurred in the night, are such as to insure that the majority would perish. This is generally true of the other buildings.

The methods of heating and lighting are those of a past generation; they are now obsolete, and matters of history in modern public institutions. The eleven stoves in use and the employment of kerosene oil for lighting, are not only unsatisfactory, but greatly increase the danger of fire.

It is not necessary to mention in detail the deficiencies of the laundry; the lack of proper accommodations for the kitchen and dining room, and the meagre and unsanitary facilities for bathing. It is quite sufficient to say that they are in complete harmony with the antiquated and worn out character of the whole establishment.

Several of the recipients of the charities of Meriden have been in past times worthy and reputable citizens, and are reduced to their present unhappy situation by unavoidable misfortunes. There are doubtless many among the citizens of Meriden to-day who are well-to-do and prosperous, but whom the events of the future will determine shall pass their last days in this institution.

Most assuredly they are entitled to as much consideration and as humane treatment as the prisoners in our jails. And yet there is not a county jail in the State in which the prisoners are not more safely, sanitarily and comfortably lodged than in the Meriden poor house.

Respectfully submitted,

C. A. LINDSLEY,
G. H. WILSON.

HEARING ON AN APPEAL FROM THE ORDER OF A TOWN HEALTH OFFICER.

The following is the judicial decision on a hearing on appeal before Judge Pearne, County Health Officer of Middlesex County, to secure the removal of a hogpen located 20 feet from a milk house.

In re APPEAL OF JEANETTE LANE OF CLINTON, FROM ORDER OF HEALTH OFFICER OF CLINTON.

The appeal of Jeanette Lane from the annexed order of H. S. Reynolds, M.D., Town Health Officer of the town of Clinton, was heard, pursuant to the annexed notice, at the office of Dr. Reynolds in Clinton, on Wednesday, July 26th at 11 o'clock A. M.

There were present, Mrs. Lane and her two sons,—appellants, J. H. Sutherland, complainant, Dr. C. A. Lindsley, Secretary of the State Board of Health, and Dr. H. S. Reynolds, Town Health Officer.

After hearing the parties fully I find the following facts:

1. Mrs. Lane, the appellant, lives on the east side of the highway crossing the Shore Line railroad—next east of Indian river—and about 800 feet north from the Main street of Clinton.

Mr. Sutherland, the complainant, lives next north to Mrs. Lane. The driveway from the street into Mrs. Lane's barn is between her house and the present fence separating her property from that of Mr. Sutherland.

2. Against the division fence Mrs. Lane has a pigpen, in which she had on the 15th day of May and still has two pigs, which pen I find to have been kept in a reasonably cleanly condition—having been cleaned out at least twice each week, and the bedding renewed. This pen has been in constant use for fifty years.

3. This pen is distant from the northeast corner of Mrs. Lane's house about thirty feet, and from the southeast corner of Sutherland's house a distance a little greater. In summer the prevailing winds are from the south,—and from this I find that, when the windows of his house are open—as is the case in summer,—the noise of the pigs and the odors from the pen,—of which there must be more or less even with reasonable care and attention on the part of the owners,—are to Mr. Sutherland an inconvenience and an annoyance, and therefore a nuisance. But I find such nuisance to be a private nuisance, and not necessarily a nuisance injurious to health,—certainty not injurious to the public health. Such a nuisance should be the subject of a civil suit.

4. I find that Mr. Sutherland has a milkhouse, situated twenty feet from said pen. In this milk house he is accustomed to place milk to cool: I find also that Mrs. Lane has a milk room in her own house distant from said pen about thirty feet, in which she is accustomed to place milk to cool, and that at times she places milk to cool in the corn house, adjacent to said pen and distant therefrom eight or ten feet. That both Mr. Sutherland and Mrs. Lane, in the summer months, supply customers, living in the village of Clinton, with milk for domestic use.

5. I find, from the undisputed evidence of Dr. Lindsley, that milk, especially when cold, is the most sensitive to contamination of all the food products; that hogs are at best filthy animals, and the keeping of them, in any manner to render such keeping profitable, in such close proximity to a milk depot as this pen and these milk-rooms are situate,

cannot result otherwise than to subject the milk to probable contamination, and the consumers thereof to possible sickness and death. I find therefore that because of the foregoing, the keeping of pigs in said pen is a nuisance injurious to the public health and should be abated.

6. I find also that there is sufficient room and opportunity for Mrs. Lane to locate a pigpen upon her premises in a place safely remote from both milk-rooms and at the same time reasonably convenient to her house.

The said order of the town health officer is therefore affirmed, and the time within which it is to be obeyed is extended to August 4th, 1900.

WESLEY U. PEARNE,
County Health Officer, Middlesex County.

July 27, 1900.

THE BERLIN INSPECTION.

The following relates to the work now going on, to provide for the disposal of the sewage of New Britain:

BERLIN, CONN., July 23, 1900.

PROF. C. A. LINDSLEY, New Haven, Conn.

Dear sir:—At a special town meeting of the citizens of Berlin, a committee was appointed to confer with the State Board of Health regarding the menace to public health resulting from New Britain locating sewer beds in a very unsuitable place in our town. Will you please meet with this committee at an early date and bring any other members of the Board with you. Advise me when to meet you at Berlin depot.

Respectfully,

DANIEL WEBSTER,
Chairman of Committee.

NEW HAVEN, CONN., July 31, 1900.

To Daniel Webster, Esq., and other members of the Town Committee:

Sir:—The undersigned, members of the Connecticut State Board of Health, having, at your request, inspected to-day the site of a proposed establishment of sewage filter beds, by the city of New Britain, beg leave to submit the following report.

The selection of a site for such a purpose must necessarily be governed by other considerations as well as those which concern the public health. Chief among them are those which belong to the civil engineer. As a Board of Health any opinion which we could render would be necessarily restricted to the influences or consequences upon the public health, which might ensue to the residents from the operation of such filter beds in their vicinity.

Upon the engineering problems we have no advice to offer. The mere inspection of the premises in their present condition does not give us data enough to form any conclusion as to what the sanitary or unsanitary

effects may be, after such necessary engineering work, as will be required to prepare the place for the purpose proposed, will be completed.

In order to form a satisfactory opinion in advance of their proposed plans, it will be necessary that we should be informed on the following points:

1. Definite plans indicating the level or high water in the river.
2. The level or ground water in the proposed tract.
3. The grade at which the filter beds are to be finished.
4. The area or beds to be graded.
5. The amount of under-drainage.
6. A sketch showing the surrounding residential property.
7. The number of houses nearby and the distance to them.
8. The area proposed to be purchased or controlled by the city.

We should also know how the beds are to be constructed and operated, the area or beds to be prepared and maintained, and the number of people whose sewage is to be filtered.

That filter beds for the treatment of sewage can be constructed, where the conditions are favorable, without danger to public health, has been demonstrated in many places. The responsibility for such safe construction rests upon the engineers.

The responsibility for their proper management and maintenance rests on the city benefited, and the latter responsibility is as important as the first.

(Signed) WM. H. BREWER,
R. S. GOODWIN,
T. H. MCKENZIE,
E. K. ROOT,
C. A. LINDSLEY.

REPORT ON DERBY GARBAGE.

A Report to the Health Officer of Derby.

DR. L. D. LABONTE.

Dear Doctor:—In response to your request that I would inspect with you the method and place of disposal of garbage in Derby, and give you my opinion of the practice from a sanitary point of view, I submit the following:

It is rare indeed that a city of the size of Derby is so dangerously exposed to temptation such as the Camptown Ravine presents. It perhaps is not surprising that Derby has yielded, when we know so many other towns have been unable to resist the same sort of temptation in a much weaker form.

Camptown Ravine is a deep excavation on the side of a public highway, with high land on both sides. There are no buildings fronting on this roadway. The rear lots of a few dwellings are on the southerly side, and there is a cemetery on the opposite side. The situation therefore is such that it must necessarily be devoted to the uses of a public street, and can never be covered with buildings.

This ravine extends most of the distance between Hawthorne and Housatonic streets. It is a much used thoroughfare, not only for vehicles, but very much by foot passengers. The lower end of the ravine being in the vicinity of several factories, many of the operatives find it the shortest way to their homes. The garbage of the town of all sorts has been dumped into this deep gully, until now it is well nigh filled full.

The sanitary question may be formulated thus: Will an accumulation of organic matter of the mixed character of garbage from five to ten feet deep, from five to twenty feet wide and several hundred feet long, covered with earth, located in the vicinity of human habitations, be dangerous to health?

If the same material could be uniformly spread over ten acres of land and ploughed into it, the conditions would be favorable to speedy decomposition and resolution into elements promotive of renewed vegetation. It would act as a fertilizer and greatly increase the productive ability of the soil. But accumulation *en masse* deeply buried under the surface of the ground, it undergoes a quite different disposal. Instead of a speedy resolution into its original elements it undergoes a process of slow decomposition more or less putrid and the generation of noxious gases which escape from the surface and pollute the air. The conditions would be vastly worse if dwelling or other houses for human occupation, were built over land made of such material. But while the dilution of the noxious gases escaping in the open air would greatly obviate their hurtful effects, it would seem that in the midst of a populous town such a condition ought not to be permitted to exist in the interest of good health. Many years will elapse before the decomposing processes going on in this great mass of corruption will cease to generate deleterious gases.

It is true, such an aggregation of putrefying filth would be far more dangerous under the cellars of houses, but the present deposit is not one to which a self-respecting community can point with pride.

A liberal treatment of the surface of the collection with quick time would be beneficial.

Very respectfully,

C. A. LINDSLEY, *Secretary.*

REPORT ON LAKE QUONNIPAUG.

A Report to County Health Officer Hoadley.

NEW HAVEN, CONN., October 2, 1900.

C. E. HOADLEY, ESQ., *County Health Officer.*

Dear sir:—In response to your request that the undersigned visit, examine and report on the conditions existing at Lake Quonnipaug, in respect to their sanitary influences, we beg leave to say that we have this day inspected the premises and submit the following:

Lake Quonnipaug lies in the town of Guilford, about eight or nine miles northerly from the Guilford railroad station. It is about one

hundred and seventy feet above tide water and is the source of West river, a mere brook at the time of our visit. It lies between granite hills which come down to the water edge on the east and west sides, and the shores of the lake are here well defined and clear.

A dam extends across the outlet 150 or 200 yards below the present foot of the lake. When the dam is open this intervening area of many acres of low wet land is uncovered and exposed to the action of the air and sun. An exactly similar condition exists at the head of the lake. We were told that this dam was built many years ago to increase the storage of the water, for the use of mills which are some miles down the stream, and that the lake is kept full and overflowing in winter and for an uncertain period later. When it is full, the dam is at the foot of the lake and the water covers all the low mud flats which we saw at our visit, the dam now being open. We were told that the water is usually drawn off in the summer and the surface lowered several feet, leaving exposed extensive areas of bottom, at both ends of the lake.

That was the condition of the water when we visited it (October 2), and it had apparently been in this condition for many weeks. The old bottom thus exposed is composed of soft spongy mud consisting largely of decaying organic matter and giving out an abundant and an offensive odor.

We have rarely if ever perceived a more pronounced odor produced by the summer exposure of the bottom of a fresh water pond.

We consider these conditions to be unsanitary. We believe that the unsanitary character may be practically abolished, certainly mitigated, by either maintaining the lake full of water both summer and winter or as to cover the places described, or by so abolishing the dam as to allow the exposed ground to become covered with grass and other vegetation. We believe that either plan will be reasonably effective.

Organic matter decomposes very slowly and incompletely when entirely covered with water. But when thus covered for a considerable portion of the year and that the cooler portion of the year, and then uncovered to the air in the heat of summer, it rots after a very different fashion and produces conditions universally conceded to be unsanitary.

The world has had much experience in this matter and we are not aware that the general fact of its unwholesomeness is denied.

Respectfully submitted,

(Signed) WM. H. BREWER,
C. A. LINDSLEY.

MILFORD SEWAGE.

A Report to the Local Health Officer of Milford.

NEW HAVEN, CONN., Nov. 3, 1900.

DR. E. B. HEADY, *Health Officer of Milford.*

Dear sir:—Responding to your request that a committee of the State Board of Health would visit and inspect the River Wepawaug as it passes through the village of Milford to determine if it is in a condition dan-

gerous to the public health, and if so found, to advise what will be the best and most permanent relief from such danger, the undersigned made a careful examination of the locality on Friday, November 2, 1900.

The river is dammed at three different points for the formation of millponds. These prevent any rapidity of current in the river and the consequent scouring of its bottom, but on the other hand favor the deposit of any undissolved matter that may be cast into it.

The most superficial examination revealed the presence of quantities of garbage in the shallow borders of the stream and the outlets of many sewers from numerous dwellings on both sides of it.

In addition to these we noticed a number of privies erected directly over the margin of the stream or ponds so that all the droppings would fall into them. Among the latter embellishments of the river banks was the privy of the town hall for the accommodation of the town officers, also that of the public school with five hundred pupils. The stench from the last two "Backhouses," assailed us strongly in the public street, before we discovered its source.

The exposure of five hundred children in a public school daily to that indecent odor ought to stir the town to some action for their relief.

We were told that the practice of sewerage into the river and making it the receptacle of every kind of refuse and filth had been uninterrupted for many years. The depths of the deposits in the bottom of the ponds we made no attempt to explore, but without doubt the accumulation is very large. Its removal would involve great expense and during process would be attended with the abominable effluvia of putrefactive decomposition.

There can be but one opinion of the insalubrity of the present condition of the river and the certainty of an exaggeration of the evil if the present practice is persisted in. The obvious and only remedy is to stop it, and provide other means of disposal of the sewage.

In the opinion of the undersigned the most practical method is to construct an intercepting sewer, on the separate plan, on the west side of the river, beginning about 1,000 feet above the Memorial Bridge and extending to a point of land about 700 feet south of the straw hat factory or to the coal wharf dock. A suitable outlet can be obtained at either point with sufficient grade to carry by gravity. There are no engineering difficulties in the way of securing a satisfactory sewer system with a good outlet into tide water.

The unsightly and offensive deposits along the shores of the ponds can be most cheaply disposed of by a covering of gravel.

The above plan or some equivalent is the more imperative because of the introduction of a public water supply.

All of which is respectfully submitted.

(Signed)

C. A. LINDSLEY,
T. H. McKENZIE.

CORRESPONDENCE.

The following illustrates the agency of schools in spreading contagion:

DR. C. A. LINDSLEY, *Secretary State Board of Health*:

Sir:—My children having scarlet fever; one daughter ten years, was seatmate with A. S., and son D., age eight years, seatmate with G. G. S. of N. W., but attending our schools by permission and by plan of reciprocal aid from and between the towns. Now I called upon Mrs. S. yesterday, and will relate her statement.

Who doctored your children last spring? Doctor K. Did he come once or more? Once. Did he say they had scarlet fever? No, said they had measles. Were children broken out (any rash)? Yes, as red as a beet. Did you not know the fever? No, never saw a case, should know it was scarlet fever now. Did you ever hear afterwards that you had had scarlet? Yes, doctor told me he heard that we had it. Did he report your case to health officer? No, at least Doctor S. (health officer) did not come here. Did you know that the family Mr. B. T. had the fever fourteen days after your man left you and went to work for said T.? Yes, we knew they thought it was that, and Dr. K. thought so too. Did you know Dr. S. thought that the A.'s in B. caught the fever from washings you sent there? Yes. Did your children attend school in F. district, W.? Yes, but pretty much all the children had the fever last spring in that district. Did this boy G. attend? *Boy ans.* Yes. And when I went my hands and arms were skinning, so that you could see the scales on my paper and desk, if I rubbed them. Was the school-house disinfected? No, but no school has been held there since. Did you or children take antiseptic baths? No. Have you disinfected the house and clothing? I burned some sulphur, but not the house, everything up in it in shut rooms. I cleaned house generally. Did you think the jackets and coats worn by the children up at our school that cold spell a month or more ago were thoroughly cleaned and disinfected. They might not have been. Were they worn last spring? Yes, after the children got around. Did the doctor tell you to burn sulphur or tell you how to do it? No. (Answers of Mrs. G. S. and children that were sick last spring, 1900.)

Is this somewhat conclusive? I have explained and complained to health officer S. I now complain to you.

The following is a request for advice:

—, CONN., July 29, 1900.

Dear Dr.:—What is my duty in a case like this?

Country district, farms small ones, ten to thirty acres each, on main road. Two houses within one hundred feet of each other, barns within one hundred feet of houses, and fifty feet of each other; occupants of houses are not agreeable to each other; one man draws into his barn

yard woollen waste from the mills to mix with his manure from stables, other man says the smell drives him to keep his windows closed, etc.

I went up and detected some smell; perhaps when it was first dumped it was worse, but the same as you have seen about woollen mills.

Am I bound to do anything in a case of that kind? It is simply a nuisance and as the man who committed it says, "If I can't make manure I shall have to give up farming." Does a town health officer have to do with any such case and how much?

Yours,
_____, M.D.

Answer.

DR. _____, *Health Officer:*

Dear Doctor:—Your favor of the 29th at hand. If the conditions you speak of are such that, in your judgment, they are injurious to public health, or the health of any part of the public, it will be your duty to order them abated. But you should be prepared to defend your judgment even in court if necessary. On the other hand, if you think the conditions are only a disagreeable annoyance and not dangerous to health you cannot interfere. You have no authority in the matter. The aggrieved party can only seek satisfaction by a civil suit for damages.

Respectfully yours,
C. A. LINDSLEY, *Secretary.*

More advice requested:

_____, CONN., Nov. 8, 1900.

C. A. LINDSLEY, M.D., *Secretary, New Haven, Conn.:*

Dear sir:—The situation here is this. Four cases measles have been reported during October, and I caused a placard according to "Rule approved by State Board of Health," to be put to each house. Cases of contagious diseases occurring in my own practice are placarded. Such diseases occurring in the practice of other physicians or in families where no physician is employed are not always reported.

Now I am asked by some whose houses were placarded, if their neighbors did not have "the same kind of measles."

What am I to do in such cases?

Yours respectfully,
_____, *Town Health Officer.*

Answer.

_____, CONN., Nov. 9, 1900.

DR. _____, *Health Officer:*

My dear Doctor:—It seems to me that your duty is very plain. You should placard every house in which you are officially notified by either the physicians or head of the family, or in any other reliable way, that it contains a contagious disease.

If the physician in attendance neglects to notify you, then you should enter a formal information to your County Health Officer of his neglect.

Such a course is clearly the intention and purpose of the law and

there is no middle course. No official discrimination should be made between houses in which there are infectious diseases.

I think I have expressed myself clearly.

Very respectfully,

C. A. LINDSLEY, *Secretary.*

—, CONN., Oct. 5, 1900.

PROF. C. A. LINDSLEY, *Secretary State Board of Health, New Haven, Conn.:*

My dear Dr. Lindsley:—I am told by a lawyer that the town health officers have no authority to condemn a school privy that has its wood-work defaced with obscene cuts, with knife and pencillings.

Many such buildings, and the school houses too, are defaced with rude carvings of male and female genitals, too indecent for child or teacher to behold. Such examples are a menace to the moral health of children, and should be suppressed by the school officers, who are noted for doing nothing about stopping such practice and removing the evidence of previous offences.

I am surprised to find that the town health officer has no authority to condemn such buildings, and close the schools, if need be, until such pictures are effaced.

Please write me what you think about it.

Yours very truly,

—, M.D.,
Town Health Officer.

Answer.

DR. —, —, *Health Officer:*

Dear sir:—I cannot conceive it credible that there are in any town in Connecticut, any persons sufficiently respected to be put on a board of school visitors, who would hesitate a moment to act upon your suggestions in a case of such momentous importance to the morals of the school children. If they do refuse to act and if in a community so lost to all sense of moral decency as to elect such school visitors, you can find one other "credible" person to go with you, you should make a complaint before a judge of the Superior Court, that "the walls of the school houses and school outbuildings are defaced with obscene cuts and pencillings and rude carvings of male and female genitals too indecent for child or teacher to behold," and petition him to have them destroyed as law requires.

That you surely have authority to do, and if other means fail it is your duty to do it.

Very sincerely yours,

C. A. LINDSLEY, *Secretary.*

WATER TEST.

—, CONN., Oct. 27, 1900.

PROF. C. A. LINDSLEY, *Secretary State Board of Health:*

Dear sir:—Will you please tell me whether the inclosed test for water

is of any use or not. For some time I have been wishing that I had some simple test that I could apply, to water and tell without an extended examination whether a water was contaminated with sewage, etc., and whether it was safe for drinking purposes. There are a great many wells in use about the town and if I could have some reliable simple test which I could apply it would be of very great use to me at times.

If you will please give me an opinion of the inclosed or if you could give me some simple and reliable test for the same purpose, I would be greatly obliged to you.

Very truly yours,

_____, *Town Health Officer.*

Answer.

Dr. _____, *Health Officer:*

Dear Doctor:—I have just returned from the meeting of the American Public Health Association at Indianapolis, hence the delay in replying to your inquiry.

You say you "have been wishing for some time for some simple test of the purity of water" for drinking purposes. So have we all, but science has not yet provided it. Geo. W. Fuller, Esq., the distinguished expert on public water supplies, said at the recent meeting, that the chemists could pronounce with absolute certainty when a specimen of water was very bad, that it was unfit for use, and also they could declare a very pure water to be safe for use. But chemistry *alone* without collateral aid could not tell whether the intermediate grades were safe or not. There is no simple, single test yet known to science, such as you seem to have in mind.

Very respectfully,

C. A. LINDSLEY, *Secretary.*

AN OPINION ON QUALIFICATIONS OF A CITY HEALTH OFFICER.

_____, Conn., Aug. 25, 1900.

C. A. LINDSLEY, M.D., *Secretary State Board of Health, New Haven, Conn.:*

Dear sir:—I enclose copy of ordinance, approved by the Health Committee of this city, which will be voted upon by the Board of Aldermen of this city on the evening of September 3.

I understand that the following objections are likely to be made to it:

(1) (See Sec. IV.) That the Common Council should elect H. O. instead of Health Committee, thus making it a political prize.

(2) (See Sec. VI.) That \$50.00 per month is too large a salary for city of this size.

Please write and give me the value of your experience as regards these two questions. We are striving for a better health system and you may be able to help us much by a prompt reply.

Kindly return copy of ordinance with your answer and let us hear if possible, early next week and oblige.

Yours very truly,

_____,
Chairman Health and Nuisance Com.

Answer.

TROY, N. Y., Aug. 29, 1900.

_____, Esq., *Chairman of Health and Nuisance Committee:*

Dear sir:—Your communication and proposed ordinance has been forwarded to me at this place and I hasten to reply to your request for my opinion of Sections IV and VI of said ordinance. I beg leave to say: First in regard to the appointment of a health officer, whether by the Health Committee or the Common Council.

An opinion should be based upon the following considerations:

1st. The importance of the office to the public welfare.

2d. The necessity and means of judging of the fitness of the appointee.

3d. The relations of the health officer to the Health Committee.

The following propositions cannot be refuted: That health is of the highest importance to the welfare and prosperity of a community. That epidemics of disease are the most costly and disastrous calamities both to business interests and personal happiness to which mankind is exposed.

That applied sanitary science has diminished the frequency and extent of epidemics and reduced the death-rate in every community in which it is intelligently practiced.

That sanitary science as developed at the present day in its application to the preservation and promotion of the public health is quite distinct from the practice of medicine and requires special knowledge and special training.

That a health officer, of any community, and especially of a city in which there are constantly arising questions of public sanitation to be settled, should qualify himself by special preparation and study to be an authority on such questions. Nor only that, but also that he should be a man of some experience in public affairs, and of such recognized discretion, judgment and tact, in his dealings with the public (which from their nature will often be personal and intimate), that he will command their respect and confidence.

It follows, that a candidate fitted for that office requires qualifications of mind and scientific attainments beyond those of the average medical practitioner and good citizen. That the responsibilities and duties of the office demand the exercise of good judgment in the choice of the incumbent. And that the members of the Common Council by reason of their numbers could not have such intimate personal acquaintance with candidates, as would enable them to make so good a choice as could be made by a smaller body after personal and careful investigation of the merits of candidates.

Finally—The health officer is in close personal relations with the Health

Committee. He is their executive. They define his duties. He makes his reports to them. He executes their orders. They direct his official proceedings. He should therefore be one of their own selections, in whom they have confidence and over whom they should have full control. From the above considerations it is my opinion that the Health Committee should be authorized to appoint its own executive officer, as is the practice in many and, I think, in most similar organizations.

The second point upon which you ask my opinion relates to the salary.

My opinion would necessarily be based upon the "duties developing upon him by statutes or by ordinance and also all such other duties as may be required of him by the Health and Nuisance Committee," and still further "by the rules and regulations relative to the duties and conduct of the health officer," which the committee may require him to conform to.

In the absence of definite knowledge of what such requirements of the health officer would be in a city of from 15,000 to 20,000 inhabitants, I must give my opinion partly upon hypothetical conditions. The ordinance requires that he shall be a "medical practitioner of experience." As \$50.00 per month is not a living salary, I assume that he will be expected to earn the greater part of his subsistence by continuing in the practice of medicine. I may also assume that in the city of New London any reasonable service adequate to the needs of such a community would require not less than two or three hours per day, which would necessarily be taken from the time he might give to professional work.

It is quite reasonable also to assume that if the incumbent of the office possesses the qualifications to discharge its duties faithfully and satisfactorily, those same qualifications would speedily enable him to realize much larger returns, at the same expense of time, for professional services. In other words, the salary would not be an inducement of itself to a competent candidate for the office. On the other hand, if the office is sought and obtained by some discouraged practitioner, whose scanty professional fees afforded him only a small income, the probability is that lack of success as a practitioner would be again illustrated in his career as health officer.

Or again, if appointed by the Common Council as a reward for his political activity and because of a "pull" upon its members, my opinion is that \$50 per year, in most cases, would be a more fitting salary than \$50 per month.

The truth is, that public sanitary administration is becoming more and more appreciated; and in many cities is regarded as among the most important departments of municipal administration.

Whether the above opinions are such as you expected, I do not know, but they are the results of many years experience and observation.

I am, very respectfully yours,

C. A. LINDSLEY, *Secretary.*

REGISTRATION OF PRACTITIONERS.

During the year ending September 30th, 1900, there were fifty certificates of registration of medical practitioners issued: thirty-seven by the Committee of the Connecticut Medical Society; eight by the Homeopathic Committee, and five by the Committee of the Eclectic Association.

Of these, forty-seven were for general practice and three for midwifery. All the general practitioners are graduates of a medical college except two. One of the midwives is a graduate of the New York Woman's Maternity School of Midwifery.

Forty-seven were residents of Connecticut, one of Rhode Island, one of Massachusetts, and one of New Hampshire. Thirty are natives of Connecticut, fourteen of the other States of the Union, and six are foreign born.

Of the general practitioners, forty have graduated within three years, as follows: fourteen in 1900; eighteen in 1899, and eight in 1898; of the remaining six, one received his degree in 1897, after three attempts to pass the State examination.

Two in 1896, one of whom failed at first examination.

One in 1888.

One in 1873, who failed at first examination, and one in 1870, who failed at first attempt.

Of all those who were graduated at any time previous to 1898, only two could pass, at the first attempt, the examination required by the Committee of the Society before which they appeared.

The above facts are pregnant with suggestions relating to the method and character of the examinations. They imply that the more recently a candidate has received his degree, and the fresher he is from college studies, the better is his chance of passing the required test of attainments in medical knowledge as presented in the questions to be answered.

The test demanded has a good deal of a Procrustian character in which the recent graduate enjoys a great advantage over the practitioner of long experience.

No allowance is made for the superior fitness for practice which has been gained by years of service. The experienced practitioner must come to the same standard of accuracy on questions of an elementary nature as the young doctor fresh from his studies and recitations in them.

The questions which have been published are well adapted to test the studious habits and memory of the recent graduate; but it would seem that a somewhat different line of inquiry is required to test the practical professional skill, the tact and intelligence of one who has been actively engaged in applied medical science for a dozen years or more.

The operation of the Connecticut law, as now in force, tends to exclude from the limits of our commonwealth, members of the profession who have acquired skill and reputation in other communities, and even some who by special studies have advanced the science and the art of healing, if such attainments and distinction have been gained outside our borders.

It will require strong inducements to lead men of that character to review all the studies of their college days in order to be permitted to live and work in Connecticut. If present conditions continue the profession in this State will be almost a close corporation, limited to those who join it while they are fresh from their college work and their memory is still retentive of chemical formulae and of minute points in anatomy, physiology, the diameters of the female pelvis, etc.

It will never happen, however, in any profession, that the business and successful man, whether preacher, lawyer, doctor, or other representative of an advanced practical science, will maintain through life a minute and ready knowledge of all the rudimentary branches of his science which he was required to study as a pupil.

The special and most prominent intent and purpose of the Medical Practice Act, if not the only one, was to protect the people of Connecticut from the impositions of quackery and the dangers of ignorant and itinerant practitioners, but it was not supposed or intended that the effect of the law would deprive the people of Connecticut of the services of members of the medical profession, who have acquired skill and honorable reputation in other States, and be a bar to their admission to this State.

Such appears to be the present effect, and suggests the question whether some modification of the practice of examination might be made which will still allow it to continue the great service which it has rendered the people in the exclusion of quackery and designing medical imposters, and yet not be prohibitory to other very desirable and meritorious practitioners.

The last restrictive enactment has been in operation since July, 1897, long enough to afford an intelligent study of results, and a claim for consideration.

EXAMINATIONS BY COMMITTEE OF THE CONNECTICUT MEDICAL SOCIETY.

Dates.	Candidate for.	Found Qualified.	Not Qualified.	Conditioned.	Total.
Nov. 15, 1899	General Practice..	16	3	--	19
Jan. 18, 1900	Midwifery	1	--	--	1
Mar. 13, 1900	General Practice..	8	1	--	9
Mar. 13, 1900	Midwifery	2	--	--	2
July 10, 1900	General Practice..	19	6	1	26
		46	10	1	57

EXAMINATIONS BY COMMITTEE OF THE HOMEOPATHIC MEDICAL SOCIETY.

Dates.	Candidate for.	Found Qualified.	Not Qualified.	Conditioned.	Total.
Nov. 15, 1899	General Practice..	4	--	--	4
Nov. 15, 1899	Midwifery	--	1	--	1
Jan. 23, 1900	General Practice..	2	1	--	3
Mar. 13, 1900	General Practice..	1	--	1	2
July 10, 1900	General Practice..	4	--	1	5
		11	2	2	15

EXAMINATIONS BY COMMITTEE OF THE ECLECTIC MEDICAL ASSOCIATION.

Dates.	Candidate for.	Found Qualified.	Not Qualified.	Conditioned.	Total.
Nov. 15, 1899	General Practice..	1	2	--	3
Nov. 15, 1899	Midwifery	1	--	--	1
Mar. 13, 1900	General Practice..	2	3	--	5
July 10, 1900	General Practice..	1	1	--	2
		5	6	--	11

Total examinations by all the Committees 83; 18 found not qualified, 3 were conditioned and 62 passed successfully.

There have been only 50 registered during the year ending Sept. 30, 1900.

Inasmuch as the present law leaves the character and method of examination wholly in the hands of the committees, only specifying the subjects upon which the applicant shall be examined, it would seem to be within the authority conferred upon the committees to exercise some discretionary judgment, on the qualifications of a candidate, and not confine their decisions solely and exclusively as heretofore on the arithmetical estimates of the answers to the questions.

The following examples of examination questions are published to enable the Secretary to respond to the frequent applications of candidates for sample copies of previous examinations.

EXAMINATION QUESTIONS SUBMITTED BY THE COMMITTEE OF
CONNECTICUT MEDICAL SOCIETY.

JULY 10 AND 11, 1900.

Anatomy.

1. Name the muscles concerned in the action of mastication and deglutition.
2. Describe the prostate gland.
3. Give the origin and distribution of the great sciatic nerve.
4. Locate and describe the ileo-caecal valve.
5. Give origin and insertion of the soleus muscle.
6. Name the cavities and valves of the heart.
7. Describe the scapular bone and give articulations.
8. Name the branches of the posterior tibial artery.
9. Describe the stomach.
10. Give the articulations of the first cervical vertebra.

Physiology.

1. Describe ciliated epithelium,—where found in the human body?
2. Detail the function of the crystalline lens?
3. Describe physiologically the passage of the urine to and from the bladder?
4. What are the physiologic differences between mucous, serous, and synovial membranes?
5. Describe the gastric juices of the stomach?
6. State the functions of the roots of the spinal nerves?
7. Define peristaltic action of the intestines and state the duration of intestinal digestion?
8. Describe the blood corpuscles and state their functions?
9. Where is urea formed,—state the amount that is excreted daily, also the amount of urine?
10. Give the composition of chyle,—where is it found?

Chemistry and Hygiene.

1. State the relative condition of molecules in solids, liquid and gaseous bodies?
2. Oxygen; its properties and preparation from potassium chlorate?
3. How would you treat acute poisoning by (1) phosphorus, (2) arsenic.
4. Give the chemical formulae of (1) ammonium chloride, (2) potassium bicarbonate, (3) potassium carbonate (neutral carbonate)?
5. What are the two iodides of mercury named and what are some of their differences chemically and physically?
6. Name three methods of the diffusion of enteric typhoid fever.
7. Give the per cent. of alcohol which should be found in brandy, whisky, rum, sherry and lager beer?
8. To what is the hardness of water due, and how can it be modified for drinking?
9. Name all the measures necessary to stamp out diphtheria from a small, isolated community?
10. If given a culture of bacillus tetani contaminated with other germs, what procedures would be necessary to isolate the tetanus germ in pure culture?

Materia Medica and Therapeutics.

1. Name four respiratory stimulants and give the physiological action of each one.
2. Compare the action of chloroform and ether.
3. What is the dose of atropine, and what are the symptoms of an overdose and the treatment?
4. What is the physiological action of hyoscine and its therapeutic uses?
5. What is the physiological action of sparteine and how does it differ in this respect from scoparius?
6. From what is iodine derived, what are its salts and what is its action?
7. How would you treat headache caused by cerebral congestion—how, when caused by cerebral anaemia; give the action of the remedies used?
8. What are the incompatibles of calomel?
9. Name four drugs that you would use for vomiting and how do they relieve in each case.
10. Write a prescription for a case of acute gastritis and give the action of the remedies used.

Practice; Pathology and Diagnosis.

1. Give the etiology, clinical history, diagnosis and treatment of pericarditis.
2. What are the causes, symptoms and complications of interstitial nephritis?

3. Name the varieties and give the symptoms and treatment of acute dysentery.
4. Differential diagnosis between acute miliary tuberculosis and typhoid fever.
5. Name the pathogenic cocci and the diseases in which they occur.
6. What are the causes of oedema and explain how they operate to produce it?
7. Varieties, pathology and treatment of tonsillitis.
8. Differentiate between lichen and eczema.
9. How do carcinomata and sarcomata differ in histological structure?
10. What are the symptoms and treatment of trifacial neuralgia?

Surgery.

1. Give the causes and treatment of orchitis.
2. Give the differential diagnosis of fracture of the surgical neck of the humerus and dislocation (subglenoid).
3. What are the causes of effusion into the pleural cavity?
4. Give the varieties of aneurism.
5. What is Pott's disease and how treated?
6. What is surgical fever?
7. What physiological changes occur in repair of a fractured bone?
8. What are the coverings of an indirect inguinal hernia?
9. What is surgical shock and how treated?
10. Describe an amputation of the breast for carcinoma, i. e., the method of preparation, the lines of incision, the extent of same, drainage, method of closing wound, etc.

Obstetrics and Diseases of Women.

1. Describe the ovaries and indicate what changes take place in them at puberty.
2. Describe the signs of pregnancy necessary for a positive diagnosis at the fifth month of gestation.
3. Explain the action of the abdominal muscles in labor.
4. What measures would you take to prevent laceration of the perineum during the expulsive stage of labor?
5. Discuss the significance of albumen in the urine of the pregnant woman.
6. Give indications for, and dangers and difficulties of, decapitation of the mature foetus.
7. Give the treatment of prolapse of the funis.
8. Give the diagnosis and treatment of parenchymatous mastitis.
9. Give early symptoms, diagnosis and treatment of cancer of the cervix uteri.
10. Indications for symphyseotomy and technique of the operation.

Midwifery.

1. How would you distinguish a head from all other presentations?
2. How would you distinguish a breech from a shoulder presentation?
3. What are the dangers from placenta praevia and why?
4. What are the causes of childbed fever, and how would you know of its presence?
5. What are your duties after the birth of the child?
6. When and for what purposes may ergot be used, and when is it not to be used?
7. Under what conditions are forceps required?
8. What would you do if the newborn child does not breathe? Give your management under the worst conditions.
9. Convulsions occurring during labor, what should be done?
10. How may you prevent sore breasts?
11. What are the symptoms of disease of the kidneys during pregnancy?
12. How long should one wait after the birth of the child before delivering the placenta? What procedures do you employ to assist in its expulsion?

EXAMINATION QUESTIONS SUBMITTED BY THE COMMITTEE OF
CONNECTICUT HOMEOPATHIC MEDICAL SOCIETY.

Anatomy.

1. Give the location of the liver, spleen and bladder.
2. Describe the peritoneum.
3. Give the names and relations of the bones forming the knee joint.
4. Describe Hunter's canal and Scarpa's triangle, giving the names of the structures contained therein.
5. Through what channels does the blood pass to reach the internal jugular vein?
6. Describe the shoulder joint.
7. Describe the ankle joint.
8. Describe the lymphatic system.
9. Describe the gall bladder and biliary ducts.
10. Give the location and a brief description of the large intestine.

Physiology.

1. In case of embolism of left middle cerebral artery where would paralysis occur and why?
2. Describe the optic nerve, giving origin, termination and function.
3. State the functions of the nose, giving in sufficient detail the uses of the various parts of the nasal cavities.
4. Mention the sounds of the heart and state how they are produced and where they may be most distinctly heard.
5. Describe the act of respiration, stating how the air and blood in the lungs are altered during the process.

6. What is protoplasm and what are its properties?
7. Name five secretions and state their uses.
8. What is urea and where is it found?
9. What is the function of the lymphatic system?
10. (a) What are the functions of the spinal cord. (b) If the cord were cut at the first dorsal vertebra what powers would remain and what be lost in the regions innervated from below this point?

Medical Chemistry and Hygiene.

1. Name the chemical elements found normally in the human body. (N. B. "Elements" does not mean compounds.)
2. Give the chemical formula of nitric acid, sulphuric acid, carbon mon-oxide, carbon di-oxide, water.
3. Give two methods of detecting albumin in the urine.
4. How would you detect the presence of sugar in the urine?
5. (a) What is the amount of total solids in the urine of twenty-four hours in adult weighing about 150 lbs.? (b) How would you estimate them from given specimen? (c) What is the amount of urea in twenty-four hours? (d) How would you estimate it?
6. How is diphtheria usually communicated and what measures would you advise to prevent its spread?
7. How is typhoid fever usually communicated and what measures would you advise to prevent its spread?
8. What practicable and safe means of disposal of human excreta do you advise for country residences?
9. How is drinking water liable to be contaminated and what precautions should be taken to prevent such contamination, in both city and country?
10. What occupations and surroundings increases the liability to phthisis?

Materia Medica and Therapeutics.

1. Name four remedies useful in menorrhagia and give their characteristic indications.
2. Name three remedies useful in amenorrhoea and give their characteristic indications.
3. Give briefly the essential indications of aconite, eupatorium perf.,gelsemium and rhus tox in fever.
4. Name two remedies useful in vomiting from cerebral disturbance and two from gastric disorder, with their indications.
5. Give the symptoms of poisoning by aconite, arsenic and carbolic acid, with the treatment in each case.
6. Give the treatment, medicinal and otherwise, for suppression of the urine.
7. Discriminate between bry., phos., kali b., and tartar em. in their cough symptoms.
8. Give your treatment, medicinal and hygienic, in chorea, with indications for three or more remedies.

9. Give indications for three remedies in nocturnal enuresis.
10. How would you treat a case of iritis? (N. B. It is not a sufficient answer to say "Give the indicated remedy.")

Practice, Pathology, Diagnosis.

1. Give the diagnostic symptoms and treatment of bilious remittent fever.
2. Describe a case of spasmodic croup (uncomplicated) and give the treatment.
3. What are the symptoms of rheumatic pericarditis and its treatment?
4. Differentiate epileptiform from hysteric convulsions.
5. What is myloid or lardaceous degeneration?
6. Give the cause and significance of irregularity of pulse.
7. What are the pathological changes that take place in enterocolitis?
8. What are the symptoms and treatment of acute dysentery?
9. What produces a subnormal temperature in semi-acute cases in convalescence from acute disease and what is its prognostic value?
10. What are some of the conditions more commonly caused by teething in children and how do you account for them?

Surgery.

1. Differentiate between fracture at the surgical neck of the humerus and sub-luxation at the shoulder.
2. What parts of the skull must be avoided in trephining, and why?
3. Give your treatment for persistent nasal hemorrhage.
4. Describe a supra-pubic cystotomy and the conditions calling for it.
5. What is the characteristic shape of a tubercular joint?
6. Describe the different methods of healing of wounds, and state how long each requires.
7. In what position should the hand be placed in the treatment of a Colles's fracture?
8. Differentiate between sarcoma and carcinoma.
9. Differentiate between epithelioma and lupus.
10. What constitutional symptoms or conditions follow or attend the use of chloroform and ether?

Obstetrics and Gynaecology.

1. Describe the uterus and its appendages.
2. What symptoms suggest a diagnosis of pregnancy?
3. What should be the obstetrician's first care before making a vaginal examination in a case of labor?
4. How would you diagnose and conduct a breech presentation?
5. What is the aetiology and treatment, general and local, of puerperal fever?

6. How would you treat mammary inflammation?
7. What anaesthetic is commonly used in labor and why?
8. Describe in detail the primary operation for perinaeal laceration, also the secondary operation?
9. Define pyosalpinx and state one of its most frequent causes.
10. Give three principal indications for each of the following drugs, in diseases of women; cimicifuga, pulsatilla, sepia, murex, lillium tig, and nux vom?

EXAMINATION QUESTIONS SUBMITTED BY THE COMMITTEE OF CONNECTICUT ECLECTIC MEDICAL ASSOCIATION.

Materia Medica and Therapeutics.

1. How would you treat dangerous narcosis caused by administration of ether or chloroform?
2. Give medicinal dose of liquor potassi arsenitis; give indications for use and treatment for arsenical poisoning.
3. Name two favorite sedatives used by the Eclectic school, with indications for use; give dose for each.
4. Give source, indications for use, dose, etc., of macrotys racemosa.
5. Give common name of root from which Ecchinacea ang is derived; give indications for use and dose.
6. Give origin and active principles of nux vomica; for what conditions is it used? Give dose.
7. Oleum erigerontis,—what is this oil, what are the effects and uses?
8. For what conditions would you prescribe Apocynum cannabinum? Give source, dose, etc.
9. What is Phytolacca decandria? Give indications for use, and dose.
10. State some of the indications for the use of Hydrastis canadensis.

Obstetrics and Gynecology.

1. What are the requirements of the accoucheur at childbirth?
2. What is mole pregnancy, and how determined?
3. What do you understand by extra uterine pregnancy?
4. In case of eclampsia what would you do?
5. What is placenta previa, and what would you do in case it occurs?
6. What may be the causes of retained placenta and what would you do in case it occurs?
7. What would you do in case of shoulder presentation?
8. In case of syncope what would you do?
9. In case the bladder should be ruptured what would you do?
10. Under what conditions would you use forceps?

Theory and Practice.

1. Give cause, symptoms and treatment of broncho pneumonia, and differential diagnosis from acute croupous pneumonia.

2. Give differential diagnosis of so called membranous croup from diphtheria, and treatment for each.
3. What is cholera infantum? Give etiology, symptoms and treatment.
4. Typhoid fever. Give pathological changes, symptoms and treatment.
5. What are infectious diseases?
6. What is cerebro spinal meningitis? What is its pathology? Give treatment.
7. Define the terms tachycardia, and bradycardia.
8. Give cause, symptoms and treatment of cystitis.
9. What is pneumothorax?
10. How can contagion be transmitted?

Physiology.

1. What is the function of the parotid gland?
2. What is meant by insensible perspiration?
3. What is meant by sensible perspiration?
4. What is the chief use of saliva?
5. What is the amount of gastric juice secreted in twenty-four hours?
6. What is required to excite a flow of gastric juice?
7. What is the function of the liver?
8. What is the function of the kidneys?
9. What is the function of the skin?
10. What is the difference between nerves of motion and of sensation?
11. What is the solar plexus?

Medical Chemistry.

1. What is the formula for water?
2. From what may phosphorus be obtained?
3. What is the single principal constituent of urine?
4. (a) How would you detect albumen in the urine? (b) How would you detect sugar in the urine?
5. (a) What is an oxidizer? (b) What is a deoxidizer?
6. Give two common names for ferrous sulphate.
7. Where does iodine exist?
8. From what is lactic acid obtained?
9. What is calomel?
10. (a) What is carbolic acid? (b) Give antidotes for poisoning by carbolic acid.

Pathology and Hygiene.

1. Define the term hygiene.
2. How much oxygen is required during twenty-four hours for an adult?
3. Why are we justified in supposing that the free use of sugar does not injure the teeth?

4. What principle is ventilation founded upon? (b) How may we be sure that warm air ascends?
5. Does moist or dry air convey odorous emanations to the greatest distance?
6. Define the term pathology.
7. Explain why diphtheria often attacks one member of a family and the others escape.
8. Give pathology of an aneurism.
9. Give pathology of glaucoma.
10. Give pathology of scarlatina malignant.

Surgery.

1. Define hyperæmia and congestion, and tell the difference.
2. What is a multilocular abscess?
3. How many venereal diseases are there? What constitutional?
4. How many dislocations of the scapula and what are they?
5. Give symptoms of an impacted intracapsular fracture of the femur.
6. Give definition of a compound complicated and comminuted fracture.
7. What is an aneurism?
8. What is a polycystic tumor?
9. How many, and what are the terminations of inflammation?

Anatomy.

1. Name the bony prominences at the elbow, and the ligaments pertaining to the elbow joint.
2. Of what part does a vertebra consist? (b) Tell the processes and what their object is.
3. Describe the two principal arteries of the forearm, and tell how they form the palmar arches in the hand.
4. What is the spinal cord, and how far down the spinal canal does it extend?
5. (a) What membranes envelop the brain? (b) What processes are formed by the outer one? (c) What does the term brain include?
6. Name the muscles attached to the scapula, and give the origin of the deltoid.
7. Describe the occipital bone fully.
8. Describe the right sub-clavian artery, and tell how it differs from the left.
9. In what respect do sinuses of dura mater differ from sinuses in the bones?
10. Give the origin and insertion of the flexors of the leg.

ANNUAL REPORTS
OF THE
COUNTY HEALTH OFFICERS

ABSTRACTS FROM THE ANNUAL REPORTS OF THE COUNTY HEALTH OFFICERS.

Section 4, of the Medical Practice Act, requiring County Health Officers to keep a full record of their doings and to make report thereof annually in the month of June, to the State Board of Health, was complied with by all the County Health Officers.

Very full abstracts of these reports are here published.

[The members of the State Board of Health do not assume responsibility for opinions on sanitary questions found in the following Annual Reports of County and local Health Officers. Neither do they endorse in all instances the practice of sanitary administration as given in the reports.]

REPORT OF HARTFORD COUNTY HEALTH OFFICER.

To the Honorable State Board of Health of the State of Connecticut:

In pursuance of the Statute I hereby submit to your Honorable Board a report of my doings as County Health Officer of the County of Hartford for the year ending June 1, 1900. As the duties of my office in any one year are in many respects similar to the duties in any other year, the report from year to year must in many ways be a repetition.

In West Hartford, owing to the lack of a sewer system, there were several cases of sewerage disposal which required attention. One case in particular was a case where seven houses had been built near together. The houses having been provided with running water, water closets, etc., the disposition of the sewerage from them was quite a problem. The owner provided cesspools, but as they were on wet land near an ice pond and sloping towards the pond, ice house and other buildings, it soon was apparent that they would not take care of the sewerage safely, except with the great expense of a man and cart in constant attendance to remove the sewerage. Temporarily pipes have been laid, taking the sewerage of these houses across the street into a vacant lot. This is a method of disposal which can be utilized only a short time. A sewer system is in contemplation by the town, and is a necessity that will probably have to be provided soon.

In the town of Plainville, the health officer, after more or less trouble with nearly stagnant water in the old canal, consulted with me as to its disposition. Apparently the trouble was occasioned by the canal being used to a certain extent as a dumping ground for refuse vegetable and animal matter, there not being current enough to carry off such matter; and its collection, in shallow places where the canal bed was covered with grass, weeds and bushes, caused offensive odors which at times annoyed the adjacent residents. About the only practical remedy within the means of a small town for such a condition is to clean out the shallow places so as to induce a stronger current of water and then prohibit the use of the canal for a dumping ground; which course was recommended.

From Windsor a complaint was made to me in August that a case of diphtheria had not been reported to the town health officer. Upon investigation, I found it was claimed the case was not diagnosed as diphtheria. While it is probable a case could have been maintained against the physician for not reporting a contagious disease, nevertheless, there were such mitigating circumstances connected with it that I deemed it better to drop the case temporarily and let a prosecution depend somewhat upon the future course of the physician.

The pollution of streams is a subject to which the attention of both the town health officer and county health officer is frequently called. In dealing with the subject, the health officers are met with the fact that it is a public necessity in some cases for drainage at least temporarily to pollute streams. In individual cases, where the drainage or other pollution of streams can be disposed of in other ways, the health officers insist in keeping it out of streams. Probably the pollution of streams injure the public health more through the milk supply than in any other one way. In the town of Wethersfield the writer, while prosecuting a man for maintaining a pig-sty in such a manner as to be a public nuisance, discovered that a small stream running through the center of a small field, in which about seventy-five hogs were fed and kept, furnished, just below the piggery, water for a herd of cows, the milk from which was being sold in the city of Hartford. This is an extreme case, but cases of a similar character in a milder form are not unknown.

The importance of the Statute relating to the Prevention of Blindness of Infants, as well as a defect in the law was strikingly illustrated in a case to which my attention was directed with a request to prosecute a supposed violator. The Statute makes it the duty of a midwife, nurse or attendant having charge of an infant, if the infant has inflamed, swollen or reddened eyes, to report the case within six hours to the health officer or board of health of the place in which the parents of the infant reside. In this case the child had sore eyes and was treated at first by a non-professional, and after it was too late, taken to the hospital, where it received proper attention. The non-professional treatment resulted in the child becoming blind, whereas, it is claimed, if the child had had proper treatment from the first the blindness might have been averted. This shows clearly the importance of the law; and now comes the defect in the law. The law requires only those cases to be reported which occur within two weeks after the child's birth. It was claimed by such proof as I was not able to controvert that this case did not develop until after two weeks from the child's birth. If the case did not develop until after the two weeks from the birth then the time should be extended. Although the evidence would show the case to have developed after the two weeks, evidence is sometimes false.

The law relating to the sale of ice has been promptly enforced in all cases coming to my attention, and when I have known of ice coming into the county I have made an investigation of the water from which it came. It was reported to me that a large quantity of ice had been bought in Springfield by dealers in Hartford. After visiting the health officer of Springfield and finding that no sewerage, so far as he could discover, entered the water from which the ice was taken, and that he was officially intrusted to keep the water pure, as Springfield was largely supplied from the same source, I became satisfied that the ice was reasonably pure.

Reservoirs, school houses and public buildings in general, have been periodically examined by the respective town health officers.

The town health officers throughout the county have attended to their duties with deserved merit. During the year the health officer of Simsbury, Charles W. Wooster, M.D., owing to the

fact that he had been through a severe sickness, deemed it his duty to himself to resign from the office of health officer. William Russell Munson, M.D., was appointed to complete Dr. Wooster's term. The term of the health officer in East Granby terminated September, 1899, and as he refused a re-appointment, Frank H. Dibble, Esq., was appointed for four years from October 1, 1899.

Sixty-three cases were reported to me during the year for prosecution for various offences arising under the laws relating to public health or vital statistics. About one-third of these cases were prosecuted in court, and the others were disposed of by admonition or otherwise.

While I will not attempt to give a detailed statement of every duty performed in the office, it may help your Honorable Board somewhat to comprehend the duties performed if I state that my duties as health officer called me out of town sixty-three days, that I wrote three hundred and thirteen general letters and five hundred and eight circular letters, and that I had two hundred and eighty-two consultations.

The selectmen and a committee appointed by the town of Berlin consulted me as to whether the town and city of New Britain could be prevented from bringing its sewerage into the town of Berlin, and depositing it on sewer beds. Whether New Britain could be enjoined from bringing its sewerage into the town of Berlin would depend upon the question whether it would be or become a public nuisance to the town of Berlin. The decision of such a question would depend largely upon expert testimony.

Respectfully submitted,

DANIEL A. MARKHAM,

County Health Officer of Hartford County.

REPORT OF NEW HAVEN COUNTY HEALTH OFFICER.

To the Connecticut State Board of Health:

The following report is respectfully submitted, and is made in compliance with the law which prescribes the duties of a County Health Officer.

The Statutes regulating the provisions made for the protection of the public health in this State have been in operation for so

many years that their requirements are familiar to your honorable body, and it is only necessary to report, at this time, of my doings since the last annual report from this office was submitted for your consideration.

The work in connection with the details of the office, is, of necessity, very much the same year after year; while there are times when the amount of such work is greater than others, the average is about the same. For nearly seven years we have developed continually, and each annual report shows advance in some particular line that has tended to perfect the system, made the enforcement of the laws relating to public health possible, and, at the same time, has secured the assistance and the coöperation of the people themselves.

In connection with this particular part of our work, there have been several changes made and new plans introduced. Experience shows that as the conditions change, and we find ourselves confronted with problems that under existing methods we are unable to solve, then some plan must be adopted that will allow the case or cases to be successfully adjusted; for illustration, to prevent the making of complaints to the town health officer in cases where it was unnecessary, or because of personal feelings, a rule was adopted, that "the town health officer *might* require all complaints to be made in writing." While this rule has accomplished the desired result in one way, we found in several towns in our county that the local health officer frequently refused to investigate a complaint made in good faith because the complainant would not make a written complaint. During the past year, instructions have been given that town health officers shall investigate all unsanitary conditions in their respective towns that shall come to their notice by complaint, written or verbal, always exercising their discretion regarding any steps to be taken thereafter.

The correspondence of the office with the State and local health officials has been more this year than ever before. There can be no explanation for this except it be found in the more intimate relations that exist between the several officials mentioned. The State officials have become better acquainted with the city and town health officers, and the relations between officials in adjoining localities are becoming, each year, more and more effective. These improved conditions result in fre-

quent communications being received in this office, all of which require answers. Complications arise and the town health officer wants advice as to his legal rights in a given case. Questions are submitted by him that necessitate the giving of opinions upon all kinds of cases, ranging from his powers with the individual to his relations with the selectmen. Nearly all of this work is done by correspondence, and, taken in connection with the same duties regarding the laws relating to vital statistics, the files of the office are being filled from day to day. Copies of all opinions given, or letters written, are kept on file, and may be referred to at any time.

Appeals. The number of appeals taken from the orders of the town health officers during the past year has exceeded that of any previous year, and they have been of such a nature that much time was occupied in determining the rights of the parties. We do not attribute this to any unusual opposition to the local officer. It is undoubtedly because the town health officers, from their desire to remove every nuisance that may be detrimental to the health of the people in their respective towns, have taken the initiative and ordered the abatement of conditions that were not sanitary or safe. We think there may be another explanation, however: the people themselves, having become familiar with the system of sanitary administration under which we live, call upon the health officer to abate conditions that had long been looked upon as injurious to public health, but local influences were such that they did not hope for relief. In some cases we find upon investigation and hearing that the interests of not only the individual but a whole community are involved. I will not cite at this time the circumstances connected with any particular case, for space will not permit, and the most important will be noticed later in this report. It is very satisfactory to be able to state that in all cases the orders of the town health officers have been sustained, and we have yet to learn of a single instance where the orders have not been willingly complied with after the hearing.

Meetings. The meetings of the town, city and borough health officers of this county have been held every three months, and during the year an organization has been effected which is rapidly becoming an important factor in the health work done, not only within our jurisdiction, but throughout the

State. Records of these meetings are preserved complete in the office of the president. These meetings have been the means of raising the work of the health officers to a very high standard. An opportunity has thus been given that enabled them to meet with the members of the State Board of Health frequently, and the advice given from time to time by those who stand high in the ranks of sanitarians has been closely followed. It has been demonstrated to the satisfaction of all interested in the enforcement of the laws relating to public health, that the occasional meetings of those who must take the responsibility of protecting the citizens of this State against conditions that are detrimental to public health, is very important.

Under the head of "Nuisances Abated," a very large and important part of the work of a health officer may be included. Reports filed in this office show that there have been 804 investigations made. This includes all cases, where, either by written or verbal complaint, the health officer's attention has been called to conditions that were unsanitary, and they vary in their nature. In some instances, drains have been reported that affected only a few, while in others, the health of a whole community has been endangered. In one case complaint was made of the discharge of a sewer from the homes of more than twenty property owners upon an open meadow that was so situated as to cause serious difficulty. The local health officer ordered the nuisance abated, and an appeal was taken by twenty-two of the property owners. Several hearings were held, and the order of the health officer sustained, but the time allowed in which to abate the nuisance, extended. The final result in this case was the building of a sewer, the abatement of the nuisance, and a sanitary improvement that all appreciated. In another case a nuisance, which had existed to a slight extent for many years, but finally became very dangerous because of the change in grade made by a corporation owning the property, was abated at great expense to the owners. There are many cases that would prove interesting no doubt, but we must not go into a detailed account of each improvement that has been made the past year, because of a wise and judicious administration of the laws relating to public health in New Haven County, by the town, city and borough health officers, in whose hands the enforcement of the law is placed. I would like to call your attention to one case that stands out prominently in the work

of the year. In one town we were called upon to advise in a case where nearly four hundred tons of garbage had been allowed by a contractor to remain on the surface of the ground unburied or covered. This nuisance was on the bank of a stream that flowed through a thickly settled part of the town, and was causing trouble for hundreds of people. An order was issued forthwith to the contractor that all the garbage must be buried within six days. It was complied with. Of course, in a great many of the instances reported, where investigations were made, the local health officer was able to adjust the conditions at once, while in others the County Health Officer was called upon for advice and assistance.

The success attained in nearly all the communities in this county in the control of infectious and contagious disease is, indeed, remarkable, and the local health officers should be given credit for their work. There is one more step to be taken before our system in this county will be complete. All town health officers are working under the same code of sanitary laws and regulations; the same diseases are placarded and quarantined; the same rule follows in each town as to the care of those who are sick with contagious diseases; the same general rule is followed by all in the abatement of nuisances; but the boroughs and cities have their own by-laws relating to public health, and, in many instances, the rules of these municipalities are radically different from those of the town health officer. While it may be true, and probably is, that in larger communities different laws and rules relating to public health should prevail, yet they certainly should be as rigidly enforced in one community as in another. The work of some of the health officers is interfered with for just this reason. In one community where the boundaries of the town and city are not co-terminous, the health officer of the town observes strict quarantine rules, while the city health officer does not. Such failure to enforce the law detracts from the efficiency of the sanitary system in the whole county. I am glad to be able to say, that most of the city health officers endeavor to carry out their duty as shown by the laws of the municipalities in which they live, but we should have uniform rules, by-laws and regulations in all cities, boroughs and towns.

Every year it becomes absolutely necessary to prosecute, for violations of law relating to public health, failure to comply

with the orders of a town health officer, and violation of the laws relating to vital statistics. The past year has proven to be no exception in this matter of prosecution. Warrants have been drawn in 79 cases, but in several of them it did not become necessary to have the parties arrested. Many times a person will contest the right or authority of a health officer to order him to abate a nuisance, but in most cases, when they realize that he is simply doing his duty, and is supported by the law, the opposition is withdrawn. Cases of violation of the quarantine regulations are not frequent, but occasionally some person refuses to comply with the orders of quarantine, and is arrested. I do not recall an instance where it has been necessary to prosecute more than once in the same town for this particular offense. When the people learn that courts are in sympathy with law-abiding citizens, and do not approve of the wilful violation of any statute, order, regulation or provision, adopted for the protection of the health of the public, they hesitate and consider the consequences before they refuse to obey the instructions of their health officer. Under the present system of reports from the superintendent of vital statistics, we are able to investigate complaints of delayed birth or marriage certificates each month, and have avoided many cases where serious trouble would otherwise have been caused. We have found it necessary in cases of apparently wilful neglect and failure to return certificates to the registrar as provided by law, to prosecute and compel the payment of the fine. In this particular part of our work the necessity of prosecution arises among a class of professional men who do not consider themselves amenable to any law, but seem to think that every offense should be overlooked. There have been several complaints against physicians and midwives said to be practicing contrary to law, but no prosecutions have been brought. It is difficult to obtain evidence of the taking of money in compensation for services, especially, in the case of midwives, who having become familiar with the law, know they can avoid it by this simple excuse. Their patients are usually willing to assist them, and will even perjure themselves by saying that they did not pay for their services. Some changes are necessary in the law before it can be effectually enforced.

During the summer of 1899 the town health officer of the town of North Haven was called upon to issue a license for a

fat-rendering factory, in that town, under Sec. 3260, Chapter CCXXXII of the General Statutes of 1888. This being the first experience of the local health officer under this section, he requested me to attend a hearing and assist him in getting the information he required, before he could act intelligently upon the matter. Hearings were held, testimony introduced to show that it would not be a nuisance, and reasons given for the establishment of the factory in the town. After due consideration, the request was granted. A similar condition arose in Waterbury, and the same course followed. By this law, fat-rendering establishments, that in so many cases have caused a nuisance dangerous to public health and made serious trouble for the town health officers, are brought in under his personal control, and, if his instructions are not lived up to, he can revoke the license and compel the person or persons to comply with orders as issued.

The health officers of New Haven County, acting under instructions from this office, have examined every source of ice supply within the county and obtained information from health officers in adjoining counties in cases where the ice is brought into this county for sale. This work has been done under Sec. 2654, General Statutes, which places upon health officers the responsibility of knowing that ice, harvested for domestic purposes, comes from water that is practically pure. The result of this work has been to disclose some conditions that were decidedly unfavorable to healthful, sanitary living. I will cite one instance: a company that has been furnishing ice to the people in one of our cities for nearly half a century, had been cutting a large part of their supply from a pond where the water was used for manufacturing purposes. Investigation showed that a factory located near the shores of this pond had connected the water closets with a pipe that discharged into it. The health officer, fearing contamination from the closets, and, knowing that the sale of ice taken there would endanger the public health, immediately reported to this office. The matter was taken up with the ice company and the manufacturers, the result of the action being a removal of the danger by taking the sewage from the water closets out of the pond entirely. Many cases were reported, and where the conditions were not remedied, the supply was condemned, under the law, for domestic use. There were

examined in all, 76 ponds or sources of supply, and in some of them changes were made. On file in this office is a complete report of the conditions existing in and around every source, within this jurisdiction, from which ice is taken to be sold in this county, except the city of New Haven. This city and its health officer, by a strange provision in the law, are not within the jurisdiction of the County Health Officer, but the City Board of Health and the City Health Officer are doing all in their power to assist in carrying out the laws. This work of investigating ice supplies has been considered a very important feature by the sanitary department, and I believe the public appreciates all such efforts in its behalf.

At the request of several who were interested in the enforcing of the law which regulates the sale of poisons, I have made investigations in several towns while engaged in my regular duties. The results disclose the fact that there is really no protection afforded by this law as it now stands upon our statutes.

The regular annual examination of the returns and records of births, marriages and deaths, in the different towns in this county, has been made. I found the records and returns very much improved. These annual examinations continue to disclose irregularities, however, in the records of nearly every town in the county. In the records of the registrar of vital statistics in the town where there may be less than fifty certificates returned—and this number includes births, marriages, deaths and removal permits, I have found errors in nearly the same proportion as in the town where the returns are numbered by the hundred and thousands. In the largest municipalities of this county I have examined these certificates to the number of several thousand, and found the certificates made out more complete than ever before. The promptness with which the physicians make their returns of birth certificates is remarkable. Occasionally I find delayed returns that have been withheld purely through carelessness. Several prosecutions have been brought in such cases, where an investigation has shown that there were no reasonable explanations to be given. There are still a very few persons in this county who, in their official capacity, do not comply with the law relating to vital statistics, but I am able to say the number grows less and less every year. I might make special reference, at this time, of several registrars

in the county, whose work is as nearly perfect as possible, considering the difficulties they have to contend with, but will not do so. I think it is sufficient to say, that the registrars of New Haven County have endeavored to render all the assistance possible both to the Superintendent of Vital Statistics and to the County Health Officer. We are in communication with them nearly every day. There are questions arising constantly that are referred by them to this office for answer and advice. There are many technical violations of the law that are not prosecuted; for instance, it is frequently reported that a death has occurred in one town and the body buried in another without the regular removal permit having been obtained. Usually this occurs in a case where the deceased lived in a house very near the line between two towns. The attending physician, not knowing the boundaries, usually gives place of death as being in the town where he (the physician) resides. Upon the death certificate being presented, the registrar issues a burial permit in accordance with the details contained therein. The sexton is usually the first one to discover the error, and then we are called upon for advice at once. In all such cases, we recommend the recording of death in the town where it actually occurred, the issuing of a removal permit and completion of records as though error had not been made, always requiring memorandum to be made, explaining the reasons for the correction. Birth certificates are more complete, I think, than ever before, although there is great room for improvement yet. The system of returns, as now required by law, that is, sending copies each month to the Superintendent of Vital Statistics, has certainly improved the standard of the work very much indeed. There is still more or less trouble experienced in getting death certificates filled out properly, and I am convinced under the present law we shall not be able to get these returns up to the standard that has been attained in birth and marriage certificates.

The list of town health officers remains the same as when I last reported to your Honorable Body, with one exception. In Southbury Dr. Shepherd resigned and Dr. Green was appointed in his place.

Dated at New Haven, June 15th, 1900.

CARLETON E HOADLEY,
County Health Officer of New Haven County.

REPORT OF NEW LONDON COUNTY HEALTH OFFICER.

NORWICH, June 30, 1900.

To the State Board of Health:

As provided by law, I hereby make report of my doings as health officer of the county of New London, for the year ending May 31, 1900.

Two changes have occurred in the list of town health officers in this county during the year. Dr. Morton E. Fox was appointed to fill the vacancy caused by the death of Dr. W. M. Burchard, the health officer of Montville, and Dr. John L. Burnham was appointed to fill the vacancy occasioned by the death of Dr. W. H. H. Wallace, the health officer of Old Lyme.

Dr. E. H. Linnell, the health officer of the town of Norwich, was incapacitated by illness during a portion of the year and is at present in Europe for the benefit of his health. During his illness and absence, Dr. J. T. Black has been acting as health officer in his place by my direction.

The question of sewage disposal at Taftsville to which reference was made in my last report has not been solved, but efforts are being made with good prospect of success to lay a sewer through the most thickly populated part of the village, it being the purpose of the corporation and the land owners to share the expense. If the plan succeeds, very much of the danger to health in this locality will be averted.

The vital statistics have been examined in every town and do not show the improvement on the part of physicians in making returns hoped for. A list has been prepared with a view to prosecute the worst offenders, which will be handed to my successor with such information as I possess to aid him in their prosecution.

No appeals from the orders of town health officers have been brought before me this year, and only two complaints concerning such orders.

I have this day tendered my resignation of this office to His Excellency the Governor, the same to take immediate effect.

In closing this, my last official act, I desire to acknowledge my obligations to the various State, county and town health officers with whom I have had official relations and to testify my appreciation of their friendship, aid, and many courtesies.

Respectfully,

CHARLES F. THAYER,

County Health Officer.

REPORT OF FAIRFIELD COUNTY HEALTH OFFICER.

BRIDGEPORT, CONN., June, 1900.

To the Honorable State Board of Health:

GENTLEMEN:—Pursuant to Chapter CCXLVIII of the Public Acts of 1893, I hereby make report of my doings as County Health Officer for Fairfield County for the year ending June 1st, 1900.

During the year under notice the work of my office, while in the main similar to the work of previous years, has involved a number of features not hitherto met with.

I am pleased to believe that the year past has given evidence of a fuller appreciation on the part of the public of this county of the work done by the public health authorities in the abatement of nuisances and the prevention of the spread of contagious diseases. The local health officers of the several towns and cities have worked harmoniously with each other and with me.

There has been no change among the health officers who are my appointees, all those whose terms expired during the past year having been reappointed. Of the 22 town health officers in this county, 17 I found in office when I was first appointed to my present position in 1894, and of the five changes made, two have been rendered necessary by the death of the incumbent. The advantage of continuance in office is made very apparent by the increased efficiency of the health officers of the county as a whole, who have now become very familiar with the sanitary conditions existing in their several towns and with the laws and customs under which they are exercising their functions.

I am pleased to observe evidence of the good results of the present system of sanitary administration and particularly of quarantine and disinfection in cases of contagious disease, in the figures which appear of record in the reports of the State Board of Health.

It is well understood that there are cases of contagious disease which break out each year without assignable cause and the origin of which cannot be traced to other known cases. To prevent such primary outbreaks of certain classes of contagion, the health officer is to a great extent powerless; but in preventing spread from the primary case or cases to secondary

cases, the local health officer has his most important field of usefulness. That such spread of disease is more efficiently curtailed than previously, I am convinced not only from observation and conversation with those in a position to know, but also from the figures of the reported cases in Fairfield County.

Scarlet fever and diphtheria being the most highly contagious and virulent of the diseases commonly met with in this State, may be properly taken as a basis of comparison.

I have made a comparative examination of the figures taken from the records of the State Board of Health of these two diseases in Fairfield County for the years ending respectively June 1st, 1896 and June 1st, 1900. I take the year ending June 1st, 1896, because back of that the reports from the towns to the State Board of Health were so irregularly made as to be practically valueless as a basis of comparison. These figures show that in the year ending June 1st, 1896, there were cases of diphtheria reported from 20 of the 31 towns, cities and boroughs in Fairfield County, with an aggregate of 351 reported cases for the year or an average of $17\frac{55}{100}$ cases to each town where the disease existed.

In the year ending June 1st, 1900, there were cases of diphtheria reported from 22 towns, cities and boroughs in the county, with an aggregate of 288 reported cases, and an average of $13\frac{9}{100}$ cases in each town, borough and city where the disease existed. These figures show a reduction in the spread of diphtheria from primary cases of nearly 20 per cent.

The reports of scarlet fever for the same years in Fairfield County show a still greater decrease. During the year ending June 1st, 1896, there were reported in Fairfield County 276 cases of scarlet fever from 19 towns, cities and boroughs, or an average of $14\frac{5}{10}$ cases to each town, city and borough where the disease existed. During the past year 21 towns, cities and boroughs reported 233 cases or an average of 11 cases each. This reduction in the average number of cases per town, city and borough shows a gain of 24 per cent. This reduction in the average spread of these diseases would undoubtedly be still greater, were the reports for the earlier of the two years compared more perfect, but in the year ending June 1st, 1896, the reports of physicians to the health officers and of the health officers to the State Board of Health were much less complete and accurate than they are now. Were the increase in popula-

tion taken into account, the percentage of reduction would be still greater.

The above figures are significant in view of the fact that quarantine and disinfection are much more rigidly carried out than previously and that a greater degree of care is exercised by the public, who have come to realize more fully the desirability of the precautions required by the health officer. Could the public more fully appreciate the significance of these figures, I feel certain that the occasional opposition to the proper enforcement of necessary precautions would be reduced to a minimum.

It has happened but once during the past year that I have prosecuted a violation of quarantine. In Stratford I found it necessary to prosecute the father of a child ill with scarlet fever, who persisted in entering and leaving the quarantined premises.

Several cases of threatened violation of quarantine have been brought to my attention, one of which, a case of diphtheria in Newtown, called me hurriedly to that town. I found that the quarantine cards had been destroyed and threats had been made that no attention would be paid to the quarantine. I spent some time with the recalcitrant head of the quarantined family, deeming it wiser to bring about an observance of the quarantine than to punish him afterward for its breach. He finally came to see the wisdom of such precautions as were insisted upon by the health officer, and I am convinced carefully observed them during the further continuance of the disease in his family.

The village of Saugatuck, in the town of Westport, furnished an illustration of the necessity at times for prompt and stringent restrictive measures. Not far from the station of the N. Y., N. H. & H. R. R. at Saugatuck, is a tenement house occupied by a considerable number of non-English-speaking families with a large aggregate number of children. One of the children became ill with diphtheria and was attended by a physician from a neighboring town. For some reason not fully understood, the case was not reported with the promptness required by law and the first knowledge which the health officer had of its existence was the filing with the registrar of a certificate of the death of the child. Before the health officer reached the premises, there had been a considerable gathering of the neighbors and an exposure of several at least of the children; in the

meantime one or more cases had broken out in the same building. Quarantine of the exposed persons was immediately instituted by the health officer, but owing to ignorance or general indifference to the law or both, several of the adults left the premises. At this stage I was called in by the local health officer to advise concerning the enforcement of quarantine and found a condition which seemed to me called for prompt and effective action. I caused an officer to be stationed to enforce the quarantine throughout the 24 hours until such time as the danger of further outbreak was passed and disinfection had been made. Although there were eleven other cases among those originally exposed, the disease was confined to the immediate neighborhood of the primary case and I believe no cases occurred which could not be traced to such exposure as took place before the arrival of the health officer.

I deemed it necessary to prosecute the physician who had failed to report the original case. He pleaded guilty and paid a fine.

In my last annual report, I referred to my belief that diseased cattle were from time to time being slaughtered for sale in this county, and to the difficulty of obtaining evidence sufficient for conviction of the offenders. During the year past a report reached me that one Ryan in Trumbull had recently slaughtered a diseased cow and sold her carcass for food. Considerable investigation puts me in possession of sufficient evidence to warrant prosecution and a complaint was issued upon which Ryan was arrested. He was sentenced to a term in jail, but appealed to the Court of Common Pleas, where, when the case was reached, he forfeited a bond of \$75.

Several complaints of the sale of milk from cattle alleged to be diseased have reached me, but under the Statute I have deemed it my duty to refer them to the State Cattle Commissioner for investigation. None of them have developed anything requiring official action on my part.

During the past winter I have had occasion to advise the health officers of several towns in relation to measures restricting the use of ice from polluted sources. I believe that much has been accomplished for the public health of this county by the restriction of the sale of impure ice. In one instance an appeal was taken to me from an order of the town health officer of the town of Norwalk, in relation to the sale of ice from the

Norwalk river in the upper part of the town, which appeal I heard and fully investigated. After advising with the Secretary of the State Board of Health as to certain sanitary features, I modified the order in some respects but re-affirmed it in the main. The action of the health officer resulted in the cleansing of the watershed for some distance from the point where the ice was cut.

I have each year suggested to the town health officers of the several towns that they satisfy themselves that the school buildings were in proper sanitary condition at the close of the "long vacation," and before the reopening of the school in the Fall. This has been done, and where such conditions were not satisfactory from a sanitary standpoint, disinfection has been carried out under the supervision of the health officer of the town or other needed precautions taken.

I have not deemed it necessary to refer in detail to matters of routine which have been very similar in nature to those which have called for my attention in previous years and which have been referred to in earlier reports.

The matter of registration of vital statistics has demanded attention to about the same extent as in previous years. The gradual improvement in the character of the records referred to in former reports has continued, and most physicians exercise greater care in making their returns prompt and accurate than was previously the case. While the records are vastly superior in every respect to what they were six years ago, there are still many particulars in which they may be improved. Most physicians are now reasonably prompt in their returns of births and in the year past I have found it necessary to bring but one prosecution for delinquency in this respect,—an aggravated case of inexcusable neglect. There is, of course, a considerable number of certificates of birth which are not filed with the promptness required by law, but a large proportion of these delayed certificates are delayed but a very few days over the time fixed by the Statute for their return, while a few years ago many, if not the majority, of the physicians in the county were in the habit of delaying such returns from one to six months and sometimes a year after they should have been returned.

I regret that some clergymen are exceedingly careless in regard to the return of marriage certificates. I have corre-

sponded freely with those who are negligent in this respect in the year past and look for much better results in the near future.

The practice recently adopted by the Superintendent of Vital Statistics of reporting all delinquencies to the County Health Officer at once upon their discovery by him has made it possible to call the attention of delinquent physicians and clergymen to these delays with greater promptness than was formerly the case and has been a material aid to me in bringing about greater care on the part of those whose duty it is to make returns. The certificates of births, marriages and deaths are improved in character and completeness, although there is still a large field for improvement. Physicians fail to appreciate in many instances the purpose of the returns which they make and fail to realize that these certificates are in a sense legal documents, having a standing in court, when properly made, as evidence of the facts contained therein. A comparison of the condition of the records in the city of Bridgeport, which may be taken as a fair sample in this respect of the larger towns and cities, will illustrate the fact that a considerable advance has been made in the completeness and value of the records, and also the fact that there is yet a great field for improvement. The following table shows the errors and omissions in birth returns of Bridgeport for the years 1897 and 1899. I have taken 1897 as one of the years compared, because that is the earliest year for which I have a completed tabulated statement of errors and omissions in that city:

	Year 1897.	Year 1899.
(1) Total births returned	1,716	1,856
(2) Birthplace of one or both parents omitted or incomplete	1,181	338
(3) Age of one or both parents omitted.....	23	6
(4) Certificates which do not show on their face that they are made by a person authorized by law to make them and which would not, therefore, be competent evidence in court, unless supported by collateral proof	1,098	317
(5) Date of birth incomplete	64	26
(6) Sex of child omitted	14	7
(7) Name of father omitted or incomplete.....	25	20
(8) Maiden name of mother omitted.....	64	5
(9) Occupation of father omitted	12	10
(10) Place of birth omitted	23	1
(11) Not returned with promptness required by law....	179	125

A similar comparison of the records of death would show a similar improvement. In some towns it has been necessary for me to criticize the registrar on account of inaccuracies in his records and in the copies sent to the Superintendent of Vital Statistics. I found one office in which the original returns were being very inaccurately recorded, very material facts appearing on the originals being omitted entirely from the records. I found similar omissions from the copies sent to the Superintendent of Vital Statistics. These errors have been remedied. I have had but one complaint in the course of the year of violation of the Medical Practice Act. This case I thoroughly investigated, and determined that, while possibly there was a violation of the spirit of the Statute, there was not such violation of the letter as would cause a prosecution to be successful.

The question was raised by way of inquiry rather than of complaint, whether an unregistered interne at a hospital might lawfully prescribe for patients in the hospital. After some examination of the law, I have taken the position that this might lawfully be done under our Statute. The language of the Medical Practice Act is such that its violation consists in practicing "for gain, compensation or reward received or expected." Inasmuch as the internes in the hospital referred to receive no compensation, but give their services for the educational advantage that comes to them, I have held that they were within the provision of the Statute. I have held, however, that if unregistered, they are not able to make returns of birth or death in accordance with the Statute.

Respectfully submitted,

GEORGE E. HILL,

County Health Officer for Fairfield County.

REPORT OF WINDHAM COUNTY HEALTH OFFICER.

To the Connecticut State Board of Health:

GENTLEMEN:—In compliance with the Statute I submit to you my annual report.

My work during the year has consisted of a mass of details, embracing a great deal of correspondence and consultation with local health officers, considerable personal investigation of

unhealthful conditions at the request of the local officers, and such personal examination of vital statistics as their present improved condition seemed to demand. In outline, the above constitutes my work. A detailed statement of it would simply show that much of my time has been occupied in coöperating with the local health officers, including those of two cities and one borough, in my county, and rendering them such assistance as I was able.

It is just to say that during the past year the demands on me from the local health officers have been far greater than in any previous year. This arises from the fact that the demands made on the local health officers, by their several communities, are continually increasing. Unhealthful conditions, which were tolerated when the present system of health laws was inaugurated, are now made the subject of immediate complaint to the town health officer, and by him very often referred in some form to the County Health Officer. Nothing, perhaps, would better illustrate the effectiveness of the present system of health laws than this rapidly increasing demand on the officials whose duty it is to administer the system.

The laws relating to vital statistics I have endeavored to have lived up to, both by those who have charge of the records, as well as by those who make the certificates which form the basis of the records. I have devoted several days to the examination of the vital statistics of this county, not so many days, I think, as in previous years, but as many as present really excellent condition of the statistics seemed to warrant. I have had several complaints relating to certificates, principally of births, imperfectly made, or improperly returned. In every instance I became satisfied that the defects and delinquencies were the result of inadvertence or mistake. Indeed, I am satisfied, that in some cases it is well-nigh impossible for physicians to obtain all the information that the certificates require. Thus far, I have found the physicians anxious to coöperate with me in getting the best results in this line.

I have to report only two cases of failure to obey quarantine regulations. One of them was clearly the result of ignorance, and the other happened under circumstances which made it almost excusable. In neither case did it seem to me that a prosecution ought to be brought. With the above exceptions

quarantine has been rigorously enforced, and to this fact we may perhaps ascribe the immunity which we have had from epidemics, although there have been many sporadic cases of contagious diseases in our midst. Doubtful questions have arisen relative to certain phases of the law relating to quarantine, but I have thus far had no appeal to me from any quarantine that has been ordered.

The "Medical Practice Act," while in its leading features generally, if not fully, complied with, was being violated occasionally by parties acting in the capacity of midwives. I have taken measures which will, I am confident, result in a cessation of these violations. The somewhat elastic provisions of the "Medical Practice Act" render it possibly doubtful as to what action the County Health Officer ought to take in some of these cases.

I have been called upon rather frequently to investigate with the local health officer nuisances, and to advise as to their abatement. Little difficulty presents itself in these cases except in thickly populated places where there is no system of sewerage. I am obliged to say that our action in those places has been far from satisfactory even to ourselves. The nuisances are unhealthful and ought to be abated. It is not possible to permanently abate them until a system of sewerage is established. In conjunction with the local health officers, I have done what I could to ameliorate the unhealthful conditions.

I have been called upon to examine alleged pollution of water supply, and have found that in some respects legislation is apparently needed to more thoroughly protect the public in this respect. I have instructed the local health officers as to their duties concerning the examination and condemnation of ice, cut from places prohibited by the statutes.

I have not brought any prosecutions, nor have any appeals been taken to me from orders made by the town health officers.

I recognize gratefully the aid given me by the Secretary of your Board, in many matters in which I have needed, during the past year, the benefit of his knowledge of sanitation.

Dated at Windham, this 31st day of December, A. D. 1900.

WILLIAM A. KING,
County Health Officer for Windham County.

REPORT OF LITCHFIELD COUNTY HEALTH OFFICER.

To the Honorable State Board of Health:

I hereby submit the following report of my doings as County Health Officer for Litchfield County, for the year ending May 31st, 1900.

The work of the office has been largely of such a nature as to render a detailed report scarcely advisable, inasmuch as the general duties, to a great extent, required in any one town are a repetition of those required in another. In a rural community there are much fewer instances where radical measures are necessary, than in a rapidly growing community.

The health officers of the various boroughs and towns in the county are striving to perform their duty to the community which they represent in a faithful, impartial manner, and in most instances, with the exercise of wise forethought, succeed in accomplishing all that is necessary without friction. Four changes of health officers have occurred during the year. In two instances the health officer resigned because of removal from town, in another, because of advancing age and ill-health, while the fourth, at the expiration of his term, requested the appointment of another to the office, kindly holding over for some time, to avoid the necessity of haste in making the change.

The monthly and annual returns to the State Board, to the town and to the County Health Officer, required by law of the health officer, or requested by State or County Officer, have with a few exceptions been promptly and courteously made. A few I regret to say have, in this one respect, been habitually negligent.

In the care of contagious disease the local health officer has almost universally succeeded in securing the coöperation and willing obedience to such restrictions as it has seemed necessary to impose. In one case where typhoid fever was placarded the card was removed two or three times, the party acting under a misapprehension as to the law, and being guided by foolish advice. An interview with the County Health Officer led to a change of view, a courteous acknowledgment of error, and hearty coöperation thereafter. I became convinced that a prosecution was wholly unnecessary; that the sentiment in the locality, by reason of the incident and a better understanding

of the law because of it, was, and would continue to be beneficial to the health department.

In the village of Terryville, in the town of Plymouth, during May considerable diphtheria prevailed among the Polish population. The spread of the disease in spite of quarantine, and the almost certain knowledge that the quarantines were being disobeyed, in some instances, finally led, after an interview with the selectmen of the town, to the selection of parties to keep a surveillance over the premises in which the disease existed with a view of putting a stop to unlawful acts in connection with the quarantine, the lessening of the danger from the disease and the punishment of the guilty, as an object lesson to the Polish settlement. The effort resulted in the arrest of two parties whose cases were tried during June and will be referred to in next report.

The existence of three cases of typhoid fever in the borough of Winsted in November, 1899, raised anew the question as to whether ice from Greenwood's pond at New Hartford (situated on the Farmington river, and into which river, at a point about five miles above the pond, the stream which runs through the borough of Winsted empties) should be cut and marketed—the distance from the borough to the pond by way of the stream being about ten miles. A full investigation revealed that all three cases were in the same house, which was located a considerable distance from the stream or any tributary thereto, by the nearest route which any surface water could flow, nearly one-half mile, and as it was also shown that every precaution possible, and advised by the attending physician, had been observed in the disposal of the excrement, I was convinced that the danger in the ice supply, if any, was in no way enhanced by the existence of the fever, and that the true merits of the situation at Greenwood's pond were in no way affected thereby.

On June 22d, the health officer of Plymouth reported that one Fred Lexington was, and for some time had been dispensing "Kickapoo Indian" remedies from a tent located at Terryville in said town; that on June 18th a resident of the town, one Jeremiah Morris, having a sick four-year-old boy, took him to the tent and asked Lexington if he could tell what was the trouble with the child. Lexington is reported to have examined the child, listened to the breathing and to have said

the child was suffering with asthma. He was then asked if he had any remedy that would cure the child, and he said he had—prescribing a bottle of Kickapoo Cough Cure, which was purchased for the boy, because of said diagnosis and recommendation, for 25 cents—no charge for examination or for diagnosis of case being made, or fee taken. The child had diphtheria and died within a few days. My investigation seemed to me to warrant a prosecution of Mr. Lexington for violation of the “Medical Practice Act,” and he was consequently arrested, given a hearing before a justice of the peace and bound over to the Superior Court for Litchfield County, October term. When the case came up in the Superior Court for hearing on demurrer to information the judge overruled the demurrer, but intimated that if it appeared on the trial of case that no other payment than the regular price per bottle for the remedy was charged, or taken, he might charge the jury that no violation of the law had been committed, consequently the State’s attorney nolle the case. My position was that in diagnosing a case and applying a remedy to a case so diagnosed by himself, he was violating the law, even if his only compensation was derived from the sale of his medicine, which the opportunity offered, and the price received from such sale. The seriousness of the particular situation arose from the fact that the parent supposed Lexington was a physician, and relied on his diagnosis and prescription for the treatment of the child, and by reason of such reliance no other medicine was procured and the child died. While I agree that the law allows and should allow large latitude in the advertising and disposing of patent medicines, it seems to me unwise and unsafe that a salesman of such remedies should be empowered to diagnose the case in order to prescribe his remedy. The recommendation of a remedy as a cure for cough, asthma, etc., is clearly within the law. If, however, the law authorizes the dispenser of such remedies to say that such and such a person has a bad cold or the asthma, and then sell his remedy to cure that particular person, on the strength of the diagnosis, no matter what the disease actually may be—it seems to me the law is sadly defective.

In June it was reported to the State Board by the New York health authorities, that a carcass of beef shipped by J. J. Fahey

of Sharon to parties in New York, had been condemned as diseased. I took considerable pains to investigate this case, personally and through others, and am convinced that the meat was consigned to New York parties with no knowledge that it was diseased. I am obliged to say, however, as in relation to another similar case a few years since, that even had the consignee guilty knowledge, he could not be prosecuted under our law, as there was no evidence of any sale or attempt to sell in this State.

As heretofore, the usual precautions were taken this year in determining that all school houses intended for use during the fall term were in a good sanitary condition, each health officer being requested to ascertain that such school houses were in proper condition before school opened.

The existence of contagious disease throughout the State is a matter of direct report to the State Board by the local officer, and need not be further referred to herein.

No appeals have been taken during the year from the orders of local health officers, which indicates careful work on their part, many times assisted or advised by the County Health Officer.

In the summer the near completion of a new high school building in the town of Woodbury, and the proposed location of cesspools for closets close to the cellar wall of same, led to inquiry from the local health officer as to the course he ought to pursue, if the authorities having the building in charge persisted in locating said cesspool where, in his opinion and in the opinion of the State Board, grave damage to the pupils would result. He was advised to give notice to the authorities in question that the building could not be used for school purposes while the danger existed.

The drawing off of several lakes in the northwest part of the county and consequent exposure of the bottom to the sun, has given rise to considerable anxiety on the part of the residents in the vicinity. As the water from these lakes is used in manufacturing, it becomes a problem of considerable importance. One or more private suits are now pending on account of same. I have so far advised great caution on the part of the health officers—leaving the parties interested to their private remedy as far as possible—if any injury resulted from the lowering of the water and exposure of the mud.

But few of the health officers so far have availed themselves of the new law authorizing them to send, with approval of County Health Officer, to the State Board, for analysis, samples of water which it is feared is infected with typhoid fever germs.

Have coöperated with and advised the health officers of the county in many matters, leaving all strictly sanitary features for their action, assisted by State Board, if needed.

As I stated in a former report, I believe the empowering of the County Health Officer to designate some other person or health officer of an adjoining town to act as health officer, in the temporary absence or disability of the local officer, would be a wise change in the law, decidedly in the interest of speedy and proper treatment of matters requiring the attention of the local officer.

In July, it was discovered that one Katherine Ferenz of New Hartford was acting as midwife in violation of the law—not being registered. She was advised to refrain from further practice till duly qualified—which she faithfully promised to do, consequently no prosecution was had against her.

I have during the year examined the certificates of births, marriages and deaths in many of the towns. Throughout I find an increased interest in securing correct returns and a more careful preservation of same. It is a matter which requires constant supervision however, because of the neglect of some one or more requirements of the law concerning the proper endorsement of certificates, return of removal permits with the proper records thereon, etc. The anxiety on the part of a registrar to remedy one error into which he has persistently fallen results, sometimes, in confining his attention to the certainty of avoiding that oversight in the future, only to find when next examination occurs that other requirements have for a long time been entirely forgotten. Good results are, however, accomplished thereby in the end, as it shows the necessity of careful thought in connection with the performance of the duties of the office, which are so often perfunctorily performed.

In addition to forgetfulness on the part of the registrar in making proper endorsements, it has been difficult to get proper, prompt and regular returns of the sextons. There are a large number of them, and in some instances they are unable to write. In cemeteries where few burials occur the sextons

sometimes forget, from time of one burial to another, that their duty extends much further than seeing that the body is properly covered. Returns are persistently made as burials when they should be called removals; removal permits sent registrars with no endorsement, or not sent at all, etc., until demanded by the County Health Officer. Another oversight into which many sextons have persistently fallen is to make return that burial took place on day of death. One after another, with one person and another, these things are being remedied, and when oversights of the kind referred to are discovered, every effort is made to secure proper corrections before papers are filed away permanently. Some of the registrars are doing their work well, and their records are almost as complete as it is possible to make them, and when some one omission is called to their attention they are extremely anxious to, and do correct it at once, when possible. Others are showing commendable improvement.

The registrar of Litchfield, while engaged in completing old records, for which he received a large sum of money, failed to put on record many of the certificates pertaining to vital statistics for the year 1898, until after his attention was twice called to the matter by the County Health Officer, once in August and again in September, 1899.

The registrar of Salisbury resigned about May, 1899, and was thereafter employed in Waterbury. My examination of his records in August showed great neglect in spite of my prior efforts to secure better results in that town. No sextons returns or removal permits for the preceding year could be found, neither had any been recorded. While the births and deaths had apparently been recorded, only a very few certificates could be found. Neither the present town clerk or his assistant could find them. I was obliged to request the ex-registrar to return to Salisbury and straighten out matters. Such a ridiculous condition of things is partly due to the want of any system. Certificates are filed in a drawer at the house; in a pigeon hole at place of business; thrown on a shelf in the office, or carried in the pocket hoping for a more convenient time. As a consequence, when found, many are not properly endorsed and cannot now be. Many of these certificates were later found and filed together. I have reason to hope that under the new official good results will appear in that office.

I feel proud of the steady improvement in the record of vital statistics in the town of Torrington. This place has grown very rapidly, and the constantly increasing duties which devolved upon the town clerk and registrar led for a time to neglect in small matters which made a large showing at the end of the year. The registrar entered most heartily into the work of improvement and seconded my efforts whenever possible, so that at the close of the year 1898, my examination of the large number of certificates showed very few oversights, and those of such a nature that all were corrected. So far as my examination has gone, his successor is living up to the same high standard. I refer to this town in particular at this time, not because there are no other towns making a similar good showing, but because of the large, and much needed, improvement there.

Realizing from sad experience that a new registrar might take some time to learn the details of his office, and in the meantime neglect endorsements, etc., essential to complete records, I took pains to write all newly elected registrars in the county and call attention to those matters, to better enable them to take up this part of their work where their predecessors had laid it down, with the hope of retaining all improvements gained to that time.

At the beginning of the year, when changes were made in the form of death certificate to be used, I wrote all registrars concerning same and of the necessity of receiving only such certificates as complied with the law. I find so far as my investigation has yet reached that the new certificates were universally used.

I have had occasion to write to a few physicians in regard to delayed returns, and in a few instances held personal conversation with them concerning the necessity of promptness in this respect. These conversations have, I believe, resulted in a better understanding of the situation and the earnest effort that is being made to secure more valuable returns all over the county.

There are a few instances where the registrar is not provided with a vault or safe of sufficient capacity to hold all the records of the town. This ought to be remedied. At my request, the safe for records in Bethlehem has been put in better condition so that the door could be latched and lessen the danger in case of fire.

When the large number of birth, marriage and death certificates is considered, together with the varied duties connected with their reception, endorsement, record, indexing, completing, etc., and the large number of physicians, clergymen, sextons, undertakers, etc., having some duty concerning same, it is not surprising that some omissions and errors are made. In this connection it becomes the duty of the County Health Officer to rectify them so far as possible, and in the performance of this duty the hearty coöperation of the registrars of Litchfield County has been of great value to the County Health Officer.

I have attended occasional meetings of the County Health Officers at which all, or nearly all, have usually been present, and matters of interest to the County Health Officers of the entire State have been discussed, with a view to concert of action on such as is clearly for the interest of all.

It has further been my purpose to supervise and coöperate with the health officers of the towns in this county in harmony with the valued advice of the State Board of Health.

Respectfully submitted,

FRANK W. ETHERIDGE,
County Health Officer for Litchfield County.

REPORT OF MIDDLESEX COUNTY HEALTH OFFICER.

To the State Board of Health:

As required by the Statute, I have the honor to present my report for the year ending May 31, 1900.

This report does not differ materially from that of the previous year. The usual routine business of the office has been attended to, involving consultations, advice and correspondence. No matter of special importance has required attention.

But two changes has been made in the corps of town health officers of the county: one caused by the resignation of the former incumbent, and one by removal of the former incumbent from the State.

In February, 1900, a vacancy occurred in the office, of health officer of the city of Middletown. An appointment was made by the mayor, under the statute of 1895, which was not approved by the Common Council. After waiting thirty days for a

possible reconsideration of their action by the Council, I made the appointment.

The question was submitted to me by the selectmen of a town where much disinfection was required because of the extensive prevalence of a contagious disease, as to whether the cost of such disinfecting should be borne by the town or by the individuals whose premises were disinfected. My answer was that primarily such expense was proper to be borne by the individuals, but that, if there were cases where the individual could not pay for the same, the selectmen would be justified in doing so.

In the matter of vital statistics, I wish to call attention to the records kept in the several towns. By this is meant the book record. The certificate returned is the original record, and must be preserved as such record. In some cases these are carefully kept, in chronological order, flat, and convenient for reference. In other cases, such care is not observed: the certificates being folded or rolled up and put in indiscriminately. The book record, such as it is, is usually fairly well kept. But the books are somewhat antiquated, do not contain all the information furnished or required by the certificates, and are not in the true sense a record. They amount to little more than an index of the true records. To be of any use, they must be indexed. In consequence, a considerable amount of unnecessary work is imposed upon the registrars.

If the certificates could be so kept, either by binding them or pasting into adhesive files, so that they would be safely preserved, and be at all times convenient for reference, being numbered consecutively, each in its own series, and then a correct index kept, the result would be much more satisfactory. This method would lessen the labor of the registrar, reduce the increase of records in bulk and have a tendency to encourage the keeping of the record complete up to date.

Respectfully submitted,

W. U. PEARNE,
County Health Officer of Middlesex County.

REPORT OF TOLLAND COUNTY HEALTH OFFICER.

To the Honorable State Board of Health:

I respectfully submit to your Honorable Board a report of my doings as County Health Officer for Tolland County, during the year ending May 31, 1900.

On the first day of June, 1899, I received an appeal from an order issued by the town health officer of Vernon for the removal of swine from the premises of W. A. Slater, near station 100 of the Hartford, Manchester & Rockville Tramway Co., and for the filling of a certain wet depression on said premises. The appeal having been taken within forty-eight hours, I met the parties on the premises the next day, but before I arrived Slater had removed his hogs from the premises, and after a full hearing, I approved the order of the town health officer.

Complaint was made to me that certain persons were bathing in a reservoir in Vernon from which water is taken for domestic use. I called the attention of the parties to the law on the subject and warned them not to so offend in the future. As there was no more trouble, I did not think it necessary to bring any prosecutions.

I have met twice during the year with the committee in charge of the erection of the new County Home building at Vernon Center, and have consulted with them in regard to the water supply, hospital and sewage disposal. I believe the building, when completed, will be an excellent one and from a sanitary point of view will leave little to be desired. The committee are to be congratulated on their work.

I have had some complaints about the condition of the railroad stations and out-buildings. They have all been put in good order by the railroad officials when their attention has been called to it, but there seems to be no official whose duty it is to keep them so, and unless the health officer is constantly on the watch, these places are sure to be in a very unsanitary condition.

The school houses of the county are in good condition and most of the committees take an interest in keeping them so, but some require constant supervision by the health officer.

There have been two changes in health officers during the

year, the health officer of Andover resigning on account of this removal from the State, and the health officer of Willington on account of poor health. All of the town health officers have been doing good work during the year.

The vital statistics of the county are, on the whole, in very good shape, but require constant supervision, as those who make the returns get careless unless occasionally reminded of their duties. The registrars do their work well.

I have brought no prosecutions during the year.

I have had the usual number of consultations with town health officers and others and have written many letters.

The above report was commenced by Myron P. Yeomans, County Health Officer for Tolland County, but he died July 2, 1900, without completing it. I have finished it as well as I could from his records.

EDWARD M. YEOMANS,
County Health Officer.

ANNUAL REPORTS
OF
THE HEALTH OF TOWNS
BY THE
LOCAL HEALTH OFFICERS

HEALTH OF TOWNS.

The following circular was sent to every health officer in the State, suggesting a uniformity of method in the preparation of their annual reports:

To.....

Health Officer of.....

SIR:—Whereas you are required by law to make an annual report to the State Board of Health of your doings through the year, it is respectfully requested that in addition to a statement of your official work, you will give such information as you can, on each of the subjects mentioned below.

For the sake of uniformity and to assist in the utilization of these reports, will you kindly write on each topic in the order in which they are named?

It is also requested that the reports be written in narrative style, rather than in mere direct replies to questions.

Particulars are specially requested in respect to the origin of primary cases of contagious or infectious diseases and of their mode of transmission to secondary cases, when detected.

When epidemics have occurred, describe their extent and type, whether mild or virulent. Also give the methods adopted to restrict their spread.

The following subjects are respectfully suggested to be mentioned in every report. And to facilitate the compilation and editing, please give them in the same order.

DISEASES:

Measles, Scarlet Fever, Diphtheria, Membranous Croup, Whooping Cough, Typhoid Fever, Cerebro-Spinal Fever and Smallpox. Also, when they occur, Typhus Fever, Yellow Fever, Cholera, Hydrophobia, Leprosy, or any other rare or strange disorder.

What efforts are being made in your town to restrict the prevalence of Pulmonary Consumption? If any cases of Tuberculosis acquired from tuberculous milk have occurred to your knowledge, please report full particulars.

If an excessive death rate has occurred from any cause, has any investigation been made? With what result?

NUISANCES :

Number of complaints? Number abated? Number abated without complaint?

OTHER TOPICS :

Methods of Garbage Disposal and results; Methods of Sewage Disposal and results. Any improvement on past years?

Public provision, if any, for the care of Contagious Cases.

Sanitary condition of the School Houses.

Sanitary condition of other Public Buildings.

The Water Supply.

ICE PONDS :

Number examined?

Number condemned?

Number put in proper condition as result of your order?

MILK :

Do any of the dairymen in your town take any precautions, beyond the customary practice of the past, to protect the purity of their milk?

If so, please specify in what particulars?

(a) As to methods of milking.

(b) As to immediate cooling and care of the milk.

(c) As to ventilation and cleanliness of stables and health of cows.

(d) As to cleanliness of the utensils used.

If you have no personal knowledge of the above particulars, will you please so state. The importance of pure milk justifies these inquiries.

Public works of sanitary influence undertaken during the year; such as Sewers, Drainage, Public Water Supply, Public Parks, etc.

Anything in addition to the above, of sanitary interest, will be acceptable and welcome.

In behalf of the State Board of Health.

Very respectfully,

C. A. LINDSLEY, *Secretary.*

ABSTRACTS FROM THE REPORTS RECEIVED IN ANSWER TO THE PRECEDING CIRCULAR.

ANDOVER—SAMUEL L. FRENCH, Esq., *Health Officer*.

But two cases of contagious disease reported. One of whooping cough; one of typhoid fever—could find no local cause for the fever. No tuberculosis has occurred to my knowledge.

One complaint of nuisance made and abated.

Cesspools the same as usual in small country places.

Sanitary condition of school house and other public buildings is good.

The water supply is from wells and springs and is generally good, although some of them are dry at the present time, owing to the continued drought.

We have had no trouble from our ice supply.

ANSONIA—DR. L. E. COOPER, *Health Officer*.

There have been reported 264 cases of measles. This by no means represents all the cases. The cases for the most part were mild.

There have been nineteen cases of scarlet fever reported, occurring in ten out of the twelve months covered by this report.

Eleven cases of diphtheria distributed through seven months.

Also three cases of membranous croup have been reported in as many different months.

Only three cases of whooping cough have been reported, but of this disease also there have been unreported cases. There has been nothing approaching an epidemic of it, however.

Ten cases of typhoid fever have been reported in six of the twelve months.

Sixteen nuisances have been received in regular form and been investigated. Almost all of them have been found to be just and have been abated. Besides, I have received numerous

verbal complaints which have received attention, but of which I kept no record.

The city makes no collection of garbage as it should, but some of it is collected by individuals and more thrown on ash-piles or other localities where it is the source of much complaint. A few of the streets have a public sewer, but for the most part property owners have to depend on cesspools. No improvement in these respects during the past year.

There is a building on the town farm which can be used as a hospital should occasion require.

The school houses, except perhaps the Factory Street and Grove Street buildings, which are old, are in good sanitary condition. The same can not be said of the city jail, which is very bad.

The water supply is good.

No examination has been made of ice ponds.

No such restrictions as are desirable have ever been applied to the dairymen supplying this city. There are a large number of milkmen, some of them supplying but a small quantity. I have no personal knowledge as to how they care for their milk.

ASHFORD—DR. FRANK CONVERSE, *Health Officer*.

This town suffered from a severe epidemic of measles. The disease was of unusual severity in certain sections of the town, being followed by pneumonia, in two cases resulting fatally.

There were no other contagious or infectious diseases reported, except three cases of whooping cough of a mild type.

There was one nuisance complaint, and abated.

The condition of public buildings fairly good.

Water is obtained from springs and wells, and as a rule is of a superior quality. It is, however, at the present time rather below par, owing to the long continued drought.

No examination of ice ponds.

The dairymen of this town do not, to my knowledge, take any precaution beyond the customary practice of the past to protect the purity of their milk.

AVON—DR. JOHN L. NORTH, *Health Officer*.

Our town has escaped any epidemics of contagious diseases during the past year.

Have had a few cases of scarlet fever and measles, and two cases of typhoid fever were reported.

Have had a few complaints of nuisances during the year which have been abated without trouble, except one case of water pollution, and which has been somewhat improved, but not stopped entirely, although at the present it is undergoing a process of evolution and we hope the final result will be satisfactory to all concerned.

The sanitary condition of all school houses and public buildings is excellent.

Water supply is from wells and springs and is very good indeed.

Upon examination found all ice ponds in very good condition.

Dairymen handle milk just as in the past, and I am sorry to admit that their methods of handling milk show vast room for improvement in many ways. The dairymen must be educated up to the importance of perfect sanitation in the production and handling of milk before there will be any great improvement in the ways and means of milk production in the rural districts.

BARKHAMSTED—HUBERT B. CASE, ESQ., *Health Officer*.

There were forty-one cases of measles and three cases of scarlet fever located in different parts of the town—no traces of its origin; and one case of typhoid fever in September; no other cases of contagious disease reported.

No complaint of nuisances been reported.

The water supply is from wells and springs and is usually good.

I have no personal knowledge in regard to milk.

The ice supply is from the rivers and ponds; none have been examined, but I believe them to be all right. [Too credulous.—C. A. L.]

BEACON FALLS—NELSON R. ALLEN, ESQ., *Health Officer*.

The town of Beacon Falls has been very free from contagious disease.

Seven cases of measles have been reported.

One case of scarlet fever reported. I quarantined the house and subsequently disinfected it.

One case of typhoid fever developed, the only case reported during the year.

Ten complaints of nuisances have been made. I have abated nine, the tenth not necessary. I have abated two cases without complaint.

Each family disposes of their garbage; some feed it to animals and fowls, others burn it; no improvement over other years, except as the health officer gives it more attention.

A number of our sewers empty into the Naugatuck river, some into cesspools, others on the surface, results not always satisfactory.

The school houses are now in good sanitary condition. We have one public hall, that is in fair sanitary condition.

As a rule we have the best of water, both in reservoirs and wells, nothing to contaminate them, but at the present time we are nearly out of the article. However, our trust is in a power that has an unailing supply.

We have but one pond that ice is sold from in the town. I have inspected that, and find it in first-class sanitary condition.

The health officer's motto should be: "Eternal vigilance mixed with chemistry." To the chemist we owe carbolic acid, chlorid of lime, and permanganate of potash. Chemists have taught us to disinfect our sewers and drains, to ventilate our houses, to burn gas instead of oil and to light our streets with what is more powerful than gas itself, the electric light. It is to chemistry indeed that we owe almost all the comforts of everyday life.

BERLIN—DR. R. E. ENSIGN, *Health Officer.*

We have had the past year in our midst measles, scarlet fever, diphtheria, whooping cough and typhoid fever, two cases of the last mentioned, and the mortality one hundred per cent., one death from scarlet fever and one from diphtheria. I am unable to state how any of them originated.

Of nuisances some twelve complaints, which were abated usually upon calling attention to them; no need of coercive measures.

Sanitation of the school houses better and no complaint of other public buildings.

Water supply, wells and cisterns.

The ice ponds from which ice is taken for vending good. The Mattabesett river condemned.

I think the milk vended is of good quality and the venders appear to be anxious to have it so, as one of them was at considerable expense to fence his cows so that they could not drink of the sewage-polluted Mattabesett; indeed, so enlightened are the public that the vender must, to retain his customers, be up to the requirements of purity.

Considerable of the milk of this town is retailed in the city of New Britain and I have never been informed but that it is satisfactory.

There is very little pulmonary consumption in this town.

BETHANY—SAMUEL G. DAVIDSON, ESQ., *Health Officer*.

The town of Bethany is a healthy locality, and with a skillful physician located here, nearly all the diseases to which the flesh is heir, take wings and fly away, leaving scanty material with which to make report.

The water supply to the people of the town is obtained from wells and springs, which generally furnish pure water.

The ice supply is, of course, of the same purity as the water in the reservoir.

Our town has its history, and a future before it. With proper means of transportation it would rank as a first-class summer resort, where the visitor could enjoy the scenery from a commanding hilltop, a quiet nook in sequestered glen, or among its magnificent mountains.

Duties of the year: Examination of the school buildings and premises was made, and in most cases they were found to be in a satisfactory condition. We report fourteen cases diphtheria, and of this number one death, which fact was lamented, and might have been prevented by the timely aid of a physician.

I cannot let this occasion pass without paying tribute to the late and lamented Walter H. Zink, M.D., Health Officer of Branford, who was a genial fellow to meet, strong in his convictions and one who desired to be on the side of right.

The prominent questions before the public to-day as regards health are the water and ice supply, the cleanliness about school houses and dwellings, and the disposal of sewage and garbage.

The latter question is one that not only interests those in cities and villages, but those in many of the adjoining towns into which the garbage is taken.

BETHEL—DR. A. E. BARBER, *Health Officer*.

There have been reported of measles four cases (all mild), all within the borough limits.

Scarlet fever—Eighteen cases, generally mild; in one school district outside the borough there were seven cases, breaking out in the school (origin not known), and a thorough quarantine was instituted, school closed, and before opening the school house, thorough disinfection and fumigation was attended to.

Diphtheria—Fifteen cases, thirteen of these within borough limit. Mostly mild.

Whooping cough—Twelve only were reported; of these all were in borough limit, all mild.

Typhoid fever—Seven, all within borough.

Of nuisances only three complaints and abated.

The sanitary condition of school houses good. Upon inquiring of our school board I found that all the school houses had been put in good condition, renovated, cleaned, etc., as also the out-buildings.

Ice ponds—Two were examined and found in good condition, both being fed by spring water.

I am pleased to add that our townspeople are more ready to give their aid and support than heretofore.

BETHLEHEM—LEVERETT P. JUDD, ESQ., *Health Officer*.

During the fall of '99 there was one case of typhoid fever reported. Careful examination was made of the house, out-buildings and adjacent grounds, and no cause could be found, but upon inquiry it was admitted that the young man did habitually drink from whatever source water could be obtained when out gunning and rambling in the fields, therefore the cause of this single case of germ disease was attributed to this source.

There were sixteen cases in all of scarlet fever reported to me, all occurring in three houses, and in no case was the disease spread from the houses where first reported, and quarantined. Evidently and almost without question the cases reported were traceable as the direct result of contagion from

washing clothing brought from houses where the disease was at the time or had recently existed, none of which were located in this town, hence were not under the jurisdiction of your officers.

Since the close of the year there has been reported one case of typhoid. Upon looking for the cause we find that the lad, with others, had been playing quite continuously in and near a pool of water held by a small dam of their building, and which is on a stream liable to be contaminated with sewage, hence a very dangerous playground, especially in a dry season like the present.

Too much cannot be said in respect to the care needed respecting our water supply and that of our stock, especially of our milch cows.

BOLTON—DR. CHARLES F. SUMNER, *Health Officer.*

We have had no cases of infectious or contagious disease, except whooping cough, which prevailed to that extent in the North District School that it was closed towards the last of the term. No deaths.

The sanitary condition of the public building is good, including school houses with their outbuildings and surroundings.

The ice ponds have been examined and found in suitable condition.

Consumption is not as prevalent in this town as it was fifty years ago, and may be eradicated with suitable attention and care.

The water supply is the same as last year, but the season has been unusually dry, which proves a serious injury to the quality of water as well as quantity.

Nuisances few and abated readily and willingly. Method of garbage and sewage disposal same as last year.

Milk supply good, cows healthy, no tuberculosis.

BOZRAH—DR. NATHAN JOHNSON, *Health Officer.*

The health of the town has been exceptionally good, no epidemics or diseases of a severe or dangerous character having occurred.

Two cases of measles were reported, both in one family, contracted by one of the patients calling at a house* in an adjoining town, where the disease prevailed. The house was promptly placarded and no other cases were reported. Seven cases of whooping cough were reported and probably there were others not reported. The house where the disease appeared was placarded, but children were running about the streets and elsewhere, so it was impossible to effectually prevent its spread to some extent. The disease was probably contracted out of town. There were five cases of typhoid fever in a tenement house, one death. The disease broke out early in October and continued till about the middle of January; the disease was of a mild type with the exception of one case (the mother), who had severe hemorrhage from the bowels, resulting in death. Early in October a family of five members (father and four children) removed from an adjoining town into a tenement house occupied by another family, all living as one family. Previous to their removal three members of this family had suffered from the disease in a mild form and a few days after their arrival another member was attacked with the fever, and subsequently four members of the family who were occupying the house at the time of their arrival suffered from the fever, with one death. The house and surroundings were in a very filthy and unsanitary condition.

The disease could not be traced to any cause existing about the premises, as the water supply was from a well a long distance from the house, the water being conveyed through a pipe.

No other cases of contagious or infectious disease have occurred. The death-rate has not been excessive.

Consumption is a rare disease in this town.

Seven nuisances have been made, three abated; three of them without complaint. Inspections are made from time to time in the thickly populated sections with a view of correcting any unsanitary conditions existing.

Garbage in the thickly populated sections is collected in barrels and removed to some suitable and safe place; in other sections it is fed to swine and fowls, burned or buried.

* If this "house in the adjoining town" had been placarded, probably these cases would not have occurred.

The methods of sewage disposal, as with the garbage, same as last year; privies, cesspools, open and underground drains.

The sanitary condition of the school houses, after cleaning and renovating, is good, also the town hall, the only other public building.

The water supply is from wells and springs and good.

One ice pond, from which the most of the ice is taken for public use, was examined and put in proper condition. The others are all thought to be in good condition.

As to the milk supply. I do not think the dairymen take any precautions beyond the customary practice of the past to protect the purity of their milk. The milk supplied to the people is distributed soon after milking. Most of the dairymen are engaged in producing cream for the manufacture of butter, which is carried to the creamery, where the butter is made and sold. I have no knowledge, personally, of the details of the milk business.

BRIDGEPORT—DR. E. A. McLELLAN, *Health Officer*.

There have been reported of measles 587 cases; diphtheria and croup 122; scarlet fever 151, and typhoid fever 35 cases.

This is an increase over the number reported for the previous year. Measles were quite prevalent during the winter months, more prevalent than the figures indicate.

Among the certified causes of death, 21 were attributed to measles either as the primary or contributing cause. The number of cases of diphtheria and croup were increased by 24 over the year 1899. The mortality, however, was less, being about 16 per cent. for 1900 and 20 per cent. for 1899.

Scarlet fever seems to be a rising tide. About 35 cases in '98; 49 cases in '99, and 151 in 1900. The disease was of a mild type, only five deaths being attributed to this cause.

Typhoid fever has not prevailed alarmingly. Many of the cases developed after a stay at the sea shore or in the country, thus emphasizing the statement often made that people should be careful about drinking strange water.

Deaths from tuberculosis in its varied forms amount to about one-seventh of the total mortality. The percentage of deaths to population from all causes was 17.4 per 1,000.

As efforts to restrict the prevalence of pulmonary consumption the city council in December, '99, passed the following ordinance: "No person shall spit upon the floor of any public conveyance, or of any public hall or building, or the entrance thereto, nor upon any sidewalk." This ordinance has had some effect in curtailing the expectorating habit.

The health department has fumigated apartments and houses occupied by consumptives with formaldehyde.

The public dumping grounds have been kept freer from unpleasant odors than formerly. Low-lying grounds have been filled, and the outlets of some of the sewers extended to deeper and more active water. The following ordinances were adopted by the city council in July:

"All owners or occupants of dwelling houses, stores or other buildings, with which there is a back yard or other land appurtenant thereto, shall cause said yard or other land at all times to be kept clear of all filth, garbage, house dirt, waste paper, ashes, manure, tin cans, sea food shells, and all decayed or decaying animal or vegetable substances. Such substances to be placed in suitable receptacles as hereinafter specified. A receptacle for garbage, a receptacle for ashes and all mineral wastes, a receptacle for paper and all combustible wastes, a receptacle for manure and the wastes of the table.

All owners or occupants of property when these substances are produced shall dispose of them in the following manner: garbage to be collected by city and burned, ashes and combustible wastes to be disposed of within the city limits only with the permission of the director of public works, manure and stable wastes to be disposed of as frequently as directed by the Board of Health."

"No person shall sell or offer for sale or have in his possession with intent to sell in this city any unwholesome decayed or stale fruit, vegetables or provisions of any kind whatever, or any tainted, diseased, decayed or unwholesome meat or fish, or any adulterated article of food."

"The carriages used at the funeral of a person dying of a contagious disease shall be fumigated in a manner satisfactory to the Board of Health before being used for any other purpose."

Ponds which furnish the city supply of ice were all examined last fall. A sample of water from Parrott's pond near Park avenue was sent to the chemist of the State Board of Health, Dr. Herbert E. Smith, for analysis, and on his report was condemned for furnishing ice for domestic purposes.

Milk—There is nothing new to be said in reference to the milk business in this city. This food supply should receive the attention of a competent inspector.

Garbage disposal—The crematory erected by the Dixon Garbage Crematory Co. has proved a success from every point of view. It does the work in a sanitary manner and at a reasonable cost. No complaints have been received by this department of unpleasant odors arising from it. A school house, a church and several dwelling houses have recently been erected in its vicinity.

BRIDGEWATER—DR. GEORGE H. WRIGHT, *Health Officer*.

The health of the town has been excellent, and the death-rate low.

No contagious disease appeared except scarlet fever, which attacked eight children in three families, in the fall of 1899, and one young man in the summer of 1900. All the cases were mild, and without complications or sequelae. The four families affected lived far from each other, and the cases occurred at comparatively long intervals of time, so that it seems improbable that contagion spread in any case beyond the house in which the disease first appeared. In all but one case contagion almost certainly came from New Milford, where there was an epidemic of scarlet fever of a mild type. The remaining case I could not trace, possibly it also came from New Milford.

No efforts are required to prevent the spread of pulmonary consumption, which has never been prevalent here.

No nuisances were complained of, or discovered.

Garbage—Nearly every household keeps fowls or pigs or both, and all edible garbage is simply put where they can get it. Inedible rubbish is usually carried to a distance from the house and dumped or buried.

Sewage is disposed of in old-fashion water (?) closets, small buildings over shallow cellars, which are cleaned out at irregular intervals, or filled with earth and the buildings moved else-

where. The results are tolerably good. [i. e. tolerated if bad.—C. A. L.]

The sanitary condition of the school houses is good and they required less cleaning than last year.

The water supply is from wells or private springs. It is usually excellent, but the severe drought of this summer caused many wells to run dry, and some others to become unfit for drinking. Those who had used these wells were temporarily compelled to go elsewhere.

Ice is taken from two or three ponds, the water of which is mostly unfit to drink. The ice, however, is used only in refrigerators, to make ice cream, etc., almost nobody using ice water, and most people using no ice for any purpose. It is therefore not a menace to health.

The difference from the practice of the past in the care of milk is principally in the use of separators. Many farmers have their own separators, others take their milk to the creamery. The creamery is a new one, thoroughly up to date in machinery and management, and its exhibit took a high prize at Paris this summer.

BRISTOL—DR. H. D. BRENNAN, *Health Officer*.

There has been more infectious diseases reported than in some years past, which was due to an epidemic of typhoid fever in Forestville, and also a slight epidemic of scarlet fever in Bristol. There were a number of cases of measles reported during the year, though nothing like an epidemic; and as many cases were not treated by a physician, consequently were not reported. It is impossible to say how many cases occurred in the town.

Scarlet fever—There were a few sporadic cases of scarlet fever reported till May, 1900, when an epidemic of short duration broke out. There were about eighteen cases reported during the epidemic with no death.

Diphtheria—There were several cases of diphtheria reported, but at no time were there more than two cases in the town at the same time.

Membranous croup—There were but one or two cases of membranous croup reported.

Whooping cough—There has been quite a number of cases of whooping cough reported, though mostly of a mild type.

Typhoid fever—A few sporadic cases of typhoid fever reported during the first half of the year, but nothing like an epidemic till March, when a fierce epidemic broke out in Forestville with over forty cases and seven deaths. An investigation was at once made to ascertain if possible the cause of the trouble and the drinking water was suspected as the source of the trouble; a sample of the water was sent to Dr. Wolff of Hartford for analysis and was reported to be an excellent sample and entirely free from any contamination whatever. An investigation of the milk and ice supply was then made and these sources discarded. Our attention was again called to the water supply, which ultimately proved to be the source of the trouble. The village of Forestville is supplied with water that is pumped from a spring which is located but a short distance from a factory in which are employed about two hundred hands; the spring being located on one side of the river and the pump on the other, which necessitated drawing the water across the river to the pump in pipes, one of which was partly broken during a freshet in February, 1900, and allowed the river water to be sucked into the pipe, as the force on the broken pipe was a suction to draw the water from the spring to the pump. This break was discovered on April 23d, and the pumping was discontinued till the damaged pipe was replaced by a new one and all the water in the pipe drawn off and thoroughly flushed before turning on for use. Since then the pipes have been run over the river above the water to avoid a possible reoccurrence of the trouble.

Cerebro-spinal fever—Two cases of cerebro-spinal fever were reported with one death.

No other cases of contagious or infectious diseases were reported during the year. One hundred and forty complaints made, one hundred abated; ten abated without complaint.

Disposal of garbage—The garbage is disposed of by carting it to the public dumping ground, owned and cared for by the town, situated in the northwestern part of the town and about half a mile from any house. The sewage is disposed of by being conveyed to the sewer beds through a system of pipes which were put in operation in 1898, and have since they were first built given perfect satisfaction. As yet there has been no provision made for the care of contagious diseases. When any

contagious diseases are reported the patient is at once visited by the health officer; patient isolated and house quarantined with thorough fumigation and disinfecting before the quarantine is raised.

All the school houses have been thoroughly fumigated and washed and are in a sanitary condition. All public buildings in the town are well cared for and are in good condition.

The town is supplied with water from reservoirs situated among the hills about two miles from the center, which is conveyed to the consumers through a system of pipes and very free from contamination, as it is fed by rivers and springs from the adjacent mountains. There are four ice ponds in the town which have all been examined and found to be in good condition.

About the milk supply of the town no investigation has ever been made.

Several streets have been sewered during the past year and two are now under construction.

BROOKFIELD—DR. JUNIUS F. SMITH, *Health Officer*.

During the past year there has been reported seven cases of infectious and contagious diseases, besides numerous cases of whooping cough scattered about town, which were not reported, and in many cases not heard of by the health officer.

Of this number there were German measles three cases, diphtheria three, and membranous croup one case.

The last two cases of the German type were secondary to the first. Under rigid quarantine the spread of the disease was checked.

Diphtheria has been prevalent, the cases being scattered, and all of seemingly primary origin, except one secondary case. In all three cases the most rigid quarantine was instituted, and thorough disinfection employed.

Two complaints of nuisances were promptly abated.

The provision for contagious diseases rests with the health officer.

The sanitary condition of the school house is good, and of all our public buildings.

The water supply comes from wells and springs, and is usually wholesome, though the unusually severe drought has

rendered many wells, which are ordinarily potable, dangerous for drinking.

There is no public ice pond, and all the private ponds of the farmers are in good sanitary condition; our only source of menace being from Still river, which seems to be more or less polluted from hot dyes and refuse from the city of Danbury.

There is no change in the care of milk from that of former years.

BROOKLYN—DR. A. H. TANNER, *Health Officer.*

The health of the town has been good; contagious cases reported measles eight, scarlet fever two.

Garbage is disposed of by burning and composting, sewage by vaults, and surface drains, as usual.

Sanitary condition of school houses and other public buildings good.

The water supply is from springs and common wells.

I have no personal knowledge of the care of stables, but we are supplied with clean and excellent milk.

BURLINGTON—JOHN LUBY, ESQ., *Health Officer.*

There was reported five cases of measles, one case of diphtheria, one case of spinal fever, for the year ending September 30, 1900.

Nuisances abated four and number abated without complaint three.

The sanitary conditions of the school houses are good.

Water supply is good.

Ice is cut from private ponds and I think the ice is pure as it can be.

CANAAN—DR. FRANCIS S. SKIFF, *Health Officer.*

The epidemic of measles which made its appearance January 15, 1900, and continued until the early part of May, 1900, visited both young and old. The number of cases reported and attended were one hundred and twenty-eight. Although severe in character and complicated with pneumonia in several cases, all recovered. The first case was on the wood job of Mr. Columbia and attended by myself. I learned on inquiry that

this young man made a visit in Torrington just two weeks before and doubtless contracted the disease there. Eight cases in this cabin were placed under strict quarantine. About this time I heard of many cases in North Canaan, and parties who had very recently had the disease or were in the early stage attended a funeral in another part of our town, and the attendance being large the disease was well scattered. In a reasonable time a case appeared in every school and a general epidemic prevailed. Quarantine restriction was enforced until it seemed useless. Following this an epidemic of German measles occurred.

A few cases of whooping cough only.

Of pulmonary consumption we have scarcely a case in town.

Three cases of scarletina appeared the middle of August in a family who take boarders, and it was doubtless brought here. Thus far no additional cases have been reported.

Number of complaints one, which was abated at request.

No public disposal of garbage. Individuals either burn or bury as a rule. Exceptionally it is carried to the dumping ground half a mile from the village proper.

Sanitary condition of school houses and other public buildings good.

Water supply—Principally from wells and springs.

Ice ponds—Most of the ice is procured from the Housatonic river, one mile north of our village, but some from small private ponds.

The general health of the town I consider above the average.

CANTERBURY—DR. JOHN O. SMITH, *Health Officer*.

There has been one case of scarlet fever in town during the year. The case was very mild, no subsequent cases followed. No other contagious disease appeared.

No complaints of nuisances have been received, and none have been abated.

The sanitary condition of the school and other public buildings is good.

The water supply is from springs and wells.

No ice ponds examined, none condemned.

Necessary precautions are taken to guard the purity of the milk supply, as far as inquiries have been made.

CANTON—DR. WILLIAM H. CROWLEY, *Health Officer*.

During March and April we had about fifty cases of measles of severe type; the cases occurred in the northern part of the town; the school teacher while on a visit to a neighboring town was exposed to the disease, consequently his scholars suffered from it, and in many instances the parents and adults in the different families. The school was immediately closed and disinfected, strict quarantine was enforced as much as possible with the result that the disease did not gain access in the other sections of our town.

Four cases of scarlet fever occurred of a mild type; origin was due probably to importation by father of child, as he informed me he had called at a house where a child was ill; the illness in a few days after his visit proved to be scarlet fever.

Diphtheria—In November was notified of two cases in same family. A test was made, and the character of disease confirmed, and immediately the most efficient means were adopted to annihilate it; success was apparent as no further cases developed. February 1st was notified of a case, disease was contracted at the Gilbert home in Winsted; proved to be of very mild type.

Membranous croup two cases, whooping cough four cases, typhoid fever two cases reported; both patients had visited where typhoid was prevalent, and in my opinion contracted the disease from drinking water while on their visit.

To restrict the prevalence of pulmonary consumption, we as physicians endeavor to educate the people of the alarming dangers of the germ of tuberculosis.

Six nuisances have been abated without complaint, a few others made and abated.

There have been five additions to the number of sewers under our streets, the majority drain into larger sewers than into river.

Sanitary conditions of our nine school houses are good: each has been thoroughly cleaned, desks revarnished, etc., during the year. We have installed in our high school building a complete system of ventilation. Eight rooms will thereby share the benefit of the improvement. Sanitary condition of other public buildings considered good.

The water supply is largely from springs and is considered good; in outlying districts, from springs and wells.

We have numerous ice ponds in our town, all contain good water from springs. The ice taken from these ponds is considered quite pure.

Milk supply—Last April I took occasion to visit some of the premises of our dairymen. In most instances the gentlemen prided themselves in the care of their milk, the wholesome condition of the room where it was kept, and the manner in which they washed their utensils and bottles. In some cases the cows were well groomed and cared for; one method much in vogue could be greatly improved, viz.: the practice of coming directly from work in the field to engage in milking the cows with the same clothing on which has been worn day after day in the fields; only a minimum of time would be required to put on clean overalls and jacket kept for the occasion. It is understood in conjunction with the above, the hands, finger nails, etc., should receive the necessary attention.

CHAPLIN—FRANK C. LUMMIS, ESQ., *Health Officer*.

For the second time since the establishment of this office under the present law I am able to report a year with but one case of any contagious disease having been reported to me. A more than ordinarily severe case of typhoid fever of seven weeks duration is the solitary exception to our otherwise unbroken record.

The increased care shown from year to year by our people in keeping the drainage from pig-styes, sink drains, privies, etc., from our sources of drinking water, is evidently bearing good fruit. But present immunity is no assurance of future safety. A constant attention to the best sanitary methods, not only in guarding our water supply, but also in the disposal of offal, garbage and dead animals, in the drainage or filling of stagnant pools, in the thorough ventilation of living and sleeping rooms, in increased care in the handling of milk and its products, in the rigid isolation of contagious disease, and the thorough disinfection of all things connected with such patients, should be matters of vital importance, and by such attention only can we best secure the public health.

With the exception of our protracted droughts and the sudden climatic changes of our early months, the causes of disease are largely under our control, a fact which makes the work of the sanitarian vie with that of the physician, and justifies the proverbial theory of the comparative value of the ounce of the work of the former with a pound of that of the latter.

No nuisances have been reported to me for abatement. In an intelligent community such cases should never occur, and a health officer should only be needed for the prevention of contagious diseases.

CHESHIRE—DR. GEORGE E. MYERS, *Health Officer*.

The number of contagious diseases have been very small, and as near as I can find out all the cases were contracted out of town. There were three cases of measles reported, also there was reported three cases of scarlet fever, all in one family, of a very mild type. Also two cases of whooping cough. There were no other cases of contagious disease in this town to my knowledge. No cases of tuberculosis acquired from tuberculous milk to my knowledge.

There has not been an excessive death-rate during the past year.

Nuisances, number abated two. Complaints one, without complaint one.

The sanitary condition of the school houses and other public buildings is very good.

The water supply has been very poor this summer, and possibly has had something to do with the numerous cases of bowel trouble which has visited this town.

Number of ice ponds examined were two and were found to be in good condition.

I have no personal knowledge in regard to the milk supply.

CHESTER—DR. S. W. TURNER, *Health Officer*.

The year has been one of unusual health.

The contagious diseases reported were two mild cases of scarlet fever in one family of several children. By strict isolation no others had the disease, and no cases have been reported since. Nineteen cases of measles, mild form, and eight cases of whooping cough in one family.

No nuisance was reported.

In the disposal of garbage and in the condition of the streets, improvement has been made. There is room for more.

The school buildings, with the grounds, water supply, etc., were inspected in September, 1899, and the school year was begun with all in good sanitary condition.

The supply of ice, mostly from one pond, has been abundant and of good quality.

The milk supply is principally from small farms and is of good quality. It would be difficult to give official supervision and it seems unnecessary under the circumstances.

The number of deaths was thirteen. Two infants and five from seventy-five to ninety-three years, an average of eighty-three years.

By the last report of the State Board of Health the annual death-rate for the State was 15.8. For the last year the rate for Chester was ten per 1,000.

CLINTON—DR. H. S. REYNOLDS, *Health Officer*.

Measles—About thirty cases during April, May, June. Origin unknown.

Whooping cough—Three cases.

Typhoid fever—One case, origin unknown.

Nuisances—Two complaints abated.

Sewage disposal—Same as in past, although since public water supply has been furnished, the people are agitating the question of sewage very thoroughly.

Sanitary condition of school houses and public buildings good.

Water supply—Wells and cisterns, and public water supply nearly completed.

Ice pond—One, and perfectly satisfactory to the inhabitants.

Milk—I am quite sure the farmers try their best to supply good and pure milk and use precaution in protecting the public as far as they are educated in sanitation.

COLCHESTER—DR. J. T. MITCHELL, *Health Officer*.

During the past year there has been a few isolated cases of measles and whooping cough in different portions of the town which were of a very mild character.

There is no provision made to restrict the spread of pulmonary tuberculosis other than careful disinfection and disposition of sputum and excrement.

But two complaints have been received of any nuisances, which were immediately abated by the owners of the property upon which they existed when notified personally by the health officer.

The garbage is disposed of by burning.

The sewage is entirely by surface drainage.

The sanitary condition of school houses, almshouses and other public buildings is very good.

The water supply is obtained from wells and springs and is generally good and pure, although at present the great majority of them are entirely dry from the long continued drought.

No official supervision or inspection of milk supply is necessary.

The town is in good sanitary condition, and while there has been a large and varied number of cases of illness during the past year the mortality rate has been exceedingly small.

BOROUGH OF COLCHESTER—DR. J. T. MITCHELL, *Health Officer*.

We have had two distinct epidemics of measles this year, the first during February and March and the second from the middle of July up to and including the present, there being still a few scattered cases.

During the period above mentioned, i. e., February to November 1st, there has been reported to me altogether 162 cases of contagious diseases as follows, viz.: measles 154 cases, whooping cough 6 cases, diphtheria one case, and scarlet fever one case. There has also been other cases of both measles and whooping cough, which were not reported; however, these have been but few in number and among people who did not know of the sanitary laws. But on the whole our people have been very prompt and careful to report and do all they could to prevent the spread of contagious diseases. In this connection I may mention one aggravating refractory case in a family of the order of intelligence usually found in such cases. The case was the diphtheria reported during the month of July. It occurred in a small child visiting here from Philadelphia, Pa., whose brother had had the disease a short time previous. I was called early

and found the characteristic membrane and accompanying symptoms. At once administered 750 units of antitoxin, and with this and careful local treatment membrane disappeared in about six or seven days, and the child was convalescent. As soon as the throat symptoms had disappeared the family declared it was not diphtheria, tore down the quarantine sign and appeared upon the streets and in public places with the child. This case was reported to the County Health Officer, who investigated the matter personally.

The first epidemic of measles was of a very mild character, the second not of the severest type, but there were several difficult cases and quite a number were followed by pneumonia and bronchitis of severe type; however, there were no fatal cases.

No nuisances have been reported and but one observed personally, which was abated at once upon request.

Garbage is burned in all cases.

Drainage is conducted by sewers, private cesspools, and surface.

The sanitary condition of the school houses and other public buildings is as good as the average country town with equal facilities.

The water supply is entirely by wells and some springs and the quality of it has always been of the highest and best up until this summer, when during the long drought more than three-fourths of the borough wells were completely dried up and as yet quite a number have not refilled. The quality of the water at this time cannot be definitely stated, but on the whole I am inclined to think it quite pure, most wells being cleaned while dry.

Considering our facilities, the sanitary condition of the borough is as good as can be found in similar villages, and our citizens seem to exercise care and discretion in endeavoring to keep it so and prevent as far as possible any bad sanitation.

I wish to express my sincere thanks and appreciation to the public for their aid in combating the spread of the measles during the two epidemics as far as was possible by reporting promptly and disinfecting thoroughly.

COLEBROOK—HERBERT L. CULVER, ESQ., *Health Officer*.

Colebrook has been as usual almost entirely free of contagious diseases.

There was but one case, diphtheria, reported that was contracted in an adjoining town, developed in Colebrook, proving fatal.

Not one complaint of any kind.

Water supply first-class, springs and wells.

Sanitary condition of school houses very good; no other public buildings.

Ice is obtained from ponds of pure spring and brook water.

Am confident that dairymen in town pay particular attention to cleanliness and health of stock.

COLUMBIA—WM. H. YEOMANS, Esq., *Health Officer*.

No infectious diseases have been reported.

There have been no nuisances abated or complained of.

The sanitary condition of school houses and public buildings is good. Thorough cleaning of privies has been ordered.

The water supply is usually from wells.

Ice ponds are in proper condition and none have been condemned.

There is no change in precaution to protect the purity of milk. Reasonable care is taken at milking, cows are healthy, stables well ventilated. The milk cooled by immersion of cans in iced water, and utensils well washed and scalded.

CORNWALL—DR. WILLIAM M. CURTISS, *Health Officer*.

My report covers only the past five months, as my term of service began in April last. Since that time there has been no epidemic of any kind. Early in the year there was a general epidemic of measles and whooping cough. I can only mention them as occurring; since that time there has been three cases of whooping cough reported. In April there was one case of scarlet fever; the patient came here from Kent, Conn., about ten hours before the eruption appeared. The house was placarded and the patient isolated and cared for by her mother, who had no communication with the rest of the household. After the recovery of the patient the house was thoroughly fumigated and cleaned; there was no spread of the disease.

There were three cases of diphtheria. The source of contagion in the first case I was unable to discover, the other cases were the mother of the first patient and a playmate. The first case was very severe and the child died.

The one case of typhoid fever reported came here from Brooklyn.

No cases of nuisances were reported to me.

The sanitary condition of school houses and public buildings are good.

All water supply is from wells, springs and cisterns.

COVENTRY—DR. W. L. HIGGINS, *Health Officer*.

The past year has been unusually free from infectious diseases. There were a few cases each of measles, whooping cough and mild diphtheria, and two cases of typhoid fever.

No nuisances were complained of and none were abated.

The sanitary conditions of school houses and other public buildings as a rule good.

The water supply is good, but many wells failed during the dry season.

Our ice ponds are in good condition.

But our milk dealer does much business in this town and he takes excellent care of his barns, cows, milk utensils and milk. His stables are well ventilated and his cows are healthy. He cools the milk as soon as it is drawn from the cows, then puts it into pint and quart glass bottles ready for dispensing.

After a service of seven years as health officer I have come to the conclusion that the work is incompatible with my best interests and peace of mind and I have tendered my resignation to the County Health Officer, to take effect October 1, 1900.

CROMWELL—CHARLES E. BUSH, ESQ., *Health Officer*.

The general health of the town has been fairly good. A small epidemic of diphtheria of a severe form and in isolated cases occurred during the summer. The following diseases have been reported to the health officer during the year: measles one, diphtheria nine, whooping cough five, typhoid fever one.

The efforts to arrest the spread of pulmonary consumption are limited to general directions given the patient and family by attending physicians.

Nuisances—Three complaints have been received and investigation made. Two nuisances were found to exist and were abated.

Garbage and sewage disposal as in former years.

The sanitary condition of the school houses is as good as can be obtained under the present condition of antiquated buildings and methods. Other public buildings are in good sanitary condition.

The town water supply is chiefly from wells and cisterns, and is in almost all cases first-class. A public water works has been in operation during the past year, but is not in general use. The quality of this supply is liable to be poor, owing to possible contamination.

Four ice ponds have been inspected. In no case is the ice used, except for cold storage and packing purposes. For this use it is sufficiently good. The general public supply is obtained from Middletown, and is in all respects good.

Milk—I do not find that other than ordinary precautions are taken by the dealers. Cleanliness of utensils is well carried out, but the condition of stables, yards, etc., is open to much criticism.

No public works of sanitary influence have been undertaken during the year.

CITY OF DANBURY—DR. G. E. LEMMER, *Health Officer*.

I have the honor to submit the following report of the health and sanitary condition of the city of Danbury for the year ending August 31, 1900.

The list of contagious and infectious diseases reported during the year is as follows: measles thirty, scarlet fever thirteen, diphtheria thirty-six, typhoid fever sixteen.

While there has been no report of whooping cough, there have been a few cases of mild form.

No case of cerebro-spinal fever was reported during the year, as against seventeen (all fatal but one) of the year preceding.

Of our typhoid fever cases, six were infected out of town, leaving but ten cases who contracted the disease in the city.

Regarding diphtheria the number of cases reported is thirty-one less than in the annual report of 1899, when sixty-seven cases occurred during the year.

In fact, Danbury has enjoyed an unusually healthy year, at least with regard to the infectious diseases.

Nuisances—Complaints entered and abated against garbage accumulations, defective sewage, etc., numbered one hundred and thirty; number abated without complaint, forty.

With regard to improved methods of sewage disposal, our filter-bed system continues to give more positive evidence each year of having permanently solved for Danbury this vital question. During the year several new streets have been connected with the city sewage mains.

The only provision made for the isolation of contagious diseases is the town hospital for small-pox.

Our school buildings, numbering six public and three private ones, are in good sanitary condition, and are kept so during the year by strict attention to cleanliness and by frequent fumigation and disinfection when any of the contagious diseases appear.

Our water supply has been both abundant and of good quality throughout the year. Superintendent of waterworks, Blackman, frequently forwarded samples from the city main to State Chemist Smith, at Yale, the analysis of which have given satisfactory proof that we are drinking good, wholesome water.

Regarding ice ponds all sources of ice supply are maintained in a safe and good sanitary condition.

Milk—During the year I have made no official inspection of any of the twenty-four dairies that furnish Danbury's milk supply, no provision being made for this work, except on complaint; but in driving through the country on sick calls, I have frequently observed the increased cleanliness and improved barn sanitation as compared with former years. Part of this is probably the result of the prompt, vigorous measures taken in the past on the reception at this office, of complaints along this line; much of the general improvement, however, in this regard, is due, I think, first, to the fact that the Danbury creamery has put a premium on good milk, well-handled, by refusing supplies except from such farms as they personally know to be O. K., not only as regards barn cleanliness, but also with reference to the health of the cattle. This from a purely commercial standpoint has in a measure set the pace some few years past for purer milk. Other dealers are falling in line and making a bid for patronage by advertising the fact of superior sanitary environments of stock and barn. The second, but by no means a lesser reason of this unquestioned improvement, lies, I believe, in the fact that within the past few years the farmer has been furnished at but trifling cost by the State Board of Health, the State Dairy Commission, and by the daily press, with an abund-

ance of practical up-to-date information, the reading of which cannot fail of convincing him that the coming milk dealer, from business motives alone, must furnish a purer, better protected quality of milk.

TOWN OF DANBURY—DR. G. E. LEMMER, *Health Officer*.

Contagious diseases were reported as follows: scarlet fever three, diphtheria eighteen, typhoid fever three, measles eight, and small-pox one. Just before the close of school last June, whooping cough appeared in Mill Plain District, and at present writing the majority of the school children and a few adults are convalescing from the disease.

Of the diphtheria cases, six occurred in one family, and two cases each in two other families. These ten cases occurred in the lower part of the town, but at such a distance apart and length of time between, that there was no probability at least of any inter-contagion. All the remaining cases were primary and located miles apart, with no evident proof of causation in any case.

Of the typhoid fevers, two occurred in Westville District, and were the cause of one-half the district school children being kept from school through fear of taking the disease.

At the request of the Board of Education I went out to the school and explained to those interested, the difference as to communicability between typhoid fever and the contagious diseases. Our small-pox patient was an Italian workman employed on the new Court House. He had sailed from Italy on June 16th, arriving in Danbury from New York on June 30th. He came to my office the morning of July 3d, having a suspicious rash over face and neck; after an immediate consultation with two other practitioners, a confirmatory diagnosis of small-pox was made, and the patient removed at once to the isolation hospital. The town provided an immune nurse and two watchmen, to prevent possible exposure either day or night. Meals for patient and nurse were prepared at the town farm, and carried on cheap, wooden platters to the quarantine line. After each meal these were burned, as was everything used about the sick room so destroyed later on. The case having occurred in my private practice, I continued in daily attendance to the entire

exclusion of other work, until patient recovered. The case proved to be varioloid, or modified small-pox, the patient's arm showing proof of prior, successful vaccination.

July 23d patient was discharged, and after a thorough mercurial bath, he dressed in an entirely new outfit and took the train for New York. The nurse having attended the case for over a week beyond the incubatory stage, without developing the disease, it was not thought necessary to hold him beyond the time of patient's release. After fumigation of building, burning of utensils used, clothes, etc., he was put through an anti-septic bath, and with an entire new set of wearing apparel, was released from quarantine.

Nuisances complained of and abated number twenty-nine, abated without complaint twelve.

Regarding the disposal of garbage and house-sewage, the problem is easy, owing to the fact that beyond the city limits the dwellings are well apart from each other. Formerly I found many cesspools and refuse-heaps, well within the danger-line to springs and wells; but this leading factor in the causation of typhoid fever has in great measure been removed.

Regarding the public provision for the isolation of contagious diseases, the town provides a small but well-built and neat building for the care of small-pox patients. It has been used but three times within the past sixteen years, each time for one patient.

Our district schools, ten in number, are in a cleanly and good sanitary condition.

The water supply has continued pure throughout the year. Superintendent of waterworks, Blackman, has furnished samples for analysis to State Chemist Smith of New Haven, about once every two months during the year. These samples have proved to be free from anything dangerous to health. During the spring flooding, and fall "working," the water for a time has been below the desired standard, but it has at all times been free of detrimental, organic or ammoniacal admixture. A very suggestive proof lies in the very small percentage of typhoid fever cases in Danbury during the year. In the city and town the number of cases for the year was nineteen, of which seven were Danburians who had contracted the disease out of town, and were brought home for treatment.

Regarding ice ponds, five were inspected during the fall of '99; complaints of probable pollution were entered against three, which were promptly abated in a satisfactory manner.

Milk—In addition to questions with reference to methods of milking, immediate cooling, cleanliness of utensils used and stable sanitation, I know personally of improvements along this line in but a limited number of dairies, for the reason that no complaint in this regard has been entered during the year, although I formerly received many, and while the absence of such complaints is by no means a proof of universal good sanitation, I believe we have no serious milk contamination among the twenty odd dairies that supply Danbury, a fairly good evidence of which is being afforded in the extremely low percentage of intestinal troubles among the little ones.

DANIELSON—DR. W. H. JUDSON, *Health Officer*.

As regards the health of the borough it has been unusually good, our only serious epidemic was scarlet fever, of which we had about twenty cases. The cause for the spread of it was the fact that there were numerous cases of German measles in town and very few had a physician, and when the real scarlet fever appeared it came as one or two light cases and had no physician and so got into the school from whence it spread. Great difficulty was experienced by all us physicians in diagnosing the first day or two and many cases of rubeola were placarded as scarlet fever, perhaps unjustly, but in the interest of the community; no deaths.

We had a few cases of measles which came in from the epidemic they had at South Killingly, but no great amount. A very few cases of whooping cough. The ordinary few of typhoid and none of diphtheria, or at most, only one suspicious case.

There is still the open sewer or water course, which is a great nuisance, but I cannot force an abatement so have sent in my resignation and will let some other fellow try it; except this, sewage is disposed of by cesspools.

Garbage is carted off in a fairly good manner to the country and dumped on waste land.

Sanitary condition of schools is good; also of other public buildings.

Water supply is fine and abundant.

The above report is in the heart of the borough of Killingly, and as health officer for the town of Killingly I have just the same report to make for the whole town; except that we had a heavy epidemic of measles in South Killingly in the spring, probably over 150 cases. It spread like wild fire from a grange gathering. The health of the whole town has been fine during the six months I have been its officer.

DARIEN—DR. G. H. NOXON, *Health Officer*.

The number of cases of contagious diseases reported for the year were: measles fifty-six, scarlet fever one, membranous croup one, whooping cough two, typhoid fever seven. The past year we have had an epidemic of measles. There were no doubt more than fifty-six cases; many were not reported. This epidemic originated in the surrounding towns and we could hardly expect to escape it. This disease has been prevalent to some extent since it last visited us. Those suffering from measles should be quarantined the same as persons sick with scarlet fever.

There was one case of scarlet fever of a severe type; the origin not ascertained. Isolation and thorough disinfection with formaldehyde prevented others.

We have had one case of membranous croup; brought from New York.

Two cases of whooping cough occurred in one family.

Seven cases of typhoid fever were reported; three of a severe type occurring in one family. These were respectively one in September, '99, one in October, '99, and one in July, 1900, showing that there must be some cause for the fever in the vicinity. The water from their wells, also that of the Center School well (which is used by people residing near) was sent to the State Board of Health for analysis. The water at the school was pronounced good drinking water, while that from their own well was found to be totally unfit for any purpose whatever. The stable, closets and cesspool were all found to be within thirty-five feet of the well, and were probably the source of all the trouble. A new well is now in construction at a safe distance and the old well has been abandoned. This should be a lesson to us that the drinking water is pure and that no

such contamination exists in the water used for domestic purposes.

Five complaints of nuisances were received; two of these my decision was appealed from, but was later sustained by that of the County Health Officer. The others were adjusted without difficulty.

The sanitary condition of the school buildings has been inspected. They were found in good condition and I am glad to see that the recommendation of last year to the Ox Ridge District has been acted upon. They have now a fine well on the site of the old spring. It would be wise if the Holmes District would follow such a good example.

The water used is obtained from wells and is the same as that found in most small towns of this size.

We have two ponds in town from which ice is cut. These seem to be furnishing a good quality of ice. They have been inspected and have no visible source of contamination.

We have no large milk dairies. Several small dairies were inspected; these were found to be in good order and most of them have methods for the immediate cooling of the milk.

There is no public water supply and sewage is into cesspools. The Soldiers' Home at Noroton has a complete system of sewerage into the Sound. It would be a fine improvement if we could have the same.

DERBY—DR. LOUIS D. LA BONTE, *Health Officer.*

The only epidemic of any importance that occurred was measles, which lasted about four months. Previous to the first case (which was reported to me in January), there had not been a case of measles in some time. Investigation showed that the family, in which this first case occurred, had recently moved to the city from Bridgeport, where measles was then raging. From this beginning of the epidemic until May, cases were reported in large numbers as will be shown.

Following is a report of cases of contagious diseases as reported: Measles one hundred and sixteen, scarlet fever thirteen, diphtheria eighteen, croup four, typhoid fever six.

Very few deaths occurred among these cases; there being one from scarlet fever in March, and one from diphtheria in August.

In all these cases the usual precautionary measures to prevent spreading were taken; quarantine being enforced, children kept from school and no outsiders allowed to enter the house.

As regards complaints of nuisances received during the year, the number has been so large that it has been impossible* to keep a record of them. Verbal complaints were not acted upon, but written complaints were required, and when found justifiable, were ordered abated. I have found in a number of cases where complaints had been made, that there was no cause for them, being occasioned by unfriendliness among neighbors. In only one case has an appeal been taken from my decision. On investigation by the County Health Officer, Mr. Hoadley, my decision was sustained.

A question of great importance to Derby is that of the disposal of garbage. This is a matter of vital interest to our city. Using as we do a thoroughfare, practically in the center of the city, for a dumping ground, one can plainly see that it is only a matter of time when this spot will be an incubator of disease. I refer to the Camptown ravine. This place has become so obnoxious to residents in that vicinity that the attention of Dr. C. A. Lindsley, Secretary of State Board of Health, was called to the matter.

After an examination of the place, he decided that it certainly was an unfit place for such a purpose and a thing that a city of the size of Derby should be ashamed to possess. His advice was a thorough treatment of the surface with quick lime and a forbidding of further dumping. The object in using this place for garbage, was to fill up the ravine. In the future ashes only will be disposed of here. This will mean that each family must have two barrels, one for garbage and one for ashes. The garbage collector will not be allowed to receive garbage and ashes mixed. Undoubtedly the best way for the disposal of garbage is by cremation. The idea has occurred to me that if we could induce the towns of Seymour, Ansonia and Shelton to join with us in building a crematory, the expense would be greatly reduced and would be within the reach of each town.

*Not at all "impossible," but very indicative of want of method in keeping records.—C. A. L.

Our sewage is disposed of by means of the Housatonic River. Although greatly improved, the system of sewerage is still insufficient; but this, no doubt, will be somewhat remedied during the coming year. Derby avenue, so thickly settled as it is, surely needs a sewer. The outhouses and cesspools that exist are a menace to health, and I dare say the greater part of the complaints made to me during the last year was from residents of Derby avenue. As there is no sewer running through the street very little could be done to abate the nuisance. Another street which requires attention is Olivia street.

Sewerage is allowed to run on the surface of the ground, and the odor arising therefrom at times is almost unbearable. The sanitary conditions have been greatly improved in the localities where the houses have been connected with the new sewers.

The sanitary condition of the school houses is satisfactory. The buildings are thoroughly cleaned and fumigated with formaldehyde twice a year. The same, however, cannot be said of the other public buildings. Being used as they are constantly by all classes of people, the need of cleanliness is very great and is but poorly supplied. The habit of expectorating on the floors of these buildings is a most common one and is in itself dangerous to health. A thorough fumigation of all public buildings would be of great assistance in promoting sanitation.

The water supply is all that can be expected. Our water company takes all precautions necessary to keep water and pipes clean and good.

Our ice is supplied by one company and is all taken from the Housatonic River, at the required distance from the mouth of any sewer.

Our milk is supplied by farmers living in surrounding towns and no precautions beyond the customary practice of the past are taken by them to protect the purity of the milk. I have had occasion to examine the cans and other utensils used by some of the milkmen and I have always found them clean. So I can safely say that the milk used in Derby is at least clean, but I cannot vouch for the purity of it.

Aside from the laying of sewers no other works of sanitary influence has been undertaken in our city during the year.

A matter of great importance is the filthy habit of expectorating on the floors of the street cars. This certainly helps to spread disease, and every one is in danger who enters a car where this is allowed. I would suggest that notices prohibiting this nuisance be posted in all street cars and public buildings, thereby, perhaps putting an end to this objectionable custom.

EASTFORD—DR. E. K. ROBBINS, *Health Officer*.

Eleven cases of measles were reported; no deaths; cause not traceable. The usual precautions were enforced; disinfection, quarantine, etc.

Nuisances—Three complaints being made; were promptly abated.

Garbage—A part of it is used as food for swine and poultry and the remainder as fertilizer. Sewage is in private cesspools and surface drains.

Sanitary condition of school houses are good. Public buildings are in good condition.

Water supply—None better; it being from springs and wells. Milk supply is first-rate, and needs no supervision.

EAST GRANBY—FRANK H. DIBBLE, ESQ., *Health Officer*.

There has been reported three cases of measles, all terminating in recovery.

There has been two cases of typhoid fever reported, with one fatality.

No nuisances have been complained of, each family attending to its garbage in its own way.

I have personally examined the school houses in the several districts in this town, and find the sanitary conditions in some districts very bad and in others not what it should be. Mostly in regard to the outhouses and condition of the vaults. I have notified the Committee concerning them. Sanitary conditions of other public buildings are good.

The water supply is almost entirely from wells. I have made no examination of the ice ponds.

The dairymen take no precaution to protect the purity of the milk beyond the customary practice, so far as I know.

EAST HADDAM—DR. M. W. PLUMSTEAD, *Health Officer.*

There has been more sickness than usual, which can be attributed partly to the late spring and the dry summer which has caused low water in most of the wells.

In January, February and March there was an epidemic of la grippe and most cases were of a mild form.

About April 1st there was a lady visiting here from New York and when she left for home had what she supposed was a bad cold, but which proved to be measles, the result was measles broke out in several families here, about ten days after. Measles has been in town ever since and in most every case from carelessness. One case was diagnosed broncho-pneumonia and four days after the measles broke out. The young man was very sick with so-called pneumonia and result was all his friends called to see him; some twelve days after three more families came down with measles. Most of the cases were of a mild type; some of the families had no physician and most of those that did were not reported. So I think measles has come to stay.

In August there was a case of scarlet fever at the falls of Moodus, and it was quarantined and every precaution taken, but in about two weeks there was another case next door in a family of five children. This case was quarantined and put in a room by itself. These cases could not be traced and no new cases have developed at this time.

In June there was a case reported as diphtheria; no new cases have developed.

No cases of whooping cough reported; a number of cases have, however, occurred, but these have come to my knowledge too late to take any measures of prevention. All cases should be reported as it is a very dangerous disease in young children.

There are only three cases of consumption in town that I know of, and they are among mill hands.

The sanitary condition of all the school houses and public buildings is good.

The ice cut and sold in town is considered pure, the ponds being a safe distance from any house, barn or animal yard. There are five large ponds from which ice is taken.

The water supply is from wells.

There has been some complaints of nuisances, but all have been abated.

During the summer months there was an epidemic of diarrhoea and dysentery.

EAST HARTFORD—DR. F. H. MAYBERRY, *Health Officer*.

The following contagious diseases have been reported: measles 13 cases, scarlet fever 23 cases, diphtheria 34 cases, whooping cough 9 cases, and typhoid fever 14 cases.

There has been no epidemic of any of the above diseases; the cases not being limited to any one locality, undoubtedly more cases of whooping cough and measles have occurred than were reported.

Forty-one complaints of nuisances have been received, of which thirty-six have been abated, also four abated without previous complaint.

The carting of garbage into the town for the purpose of manuring land and the feeding of pigs has been stopped.

A new system of sewers for the proper disposal of sewage in the more thickly settled portions has been begun and will be completed in the near future.

The sanitary state of the public buildings and school houses are in fine condition.

All ponds from which ice is cut for domestic purposes have been examined and found to be uncontaminated.

The source of the water supply has also been examined and found to be in excellent condition.

I have been very much pleased to note in several visits which I have made to the farmers supplying milk to residents of this town, the cleanliness of the stables and utensils used and also of a proper understanding of the need upon the part of the dairymen of good ventilation of their stables.

EAST HAVEN—DR. CHAS. W. HOLBROOK, *Health Officer*.

There were twenty-nine cases of measles reported in the town of East Haven; but, with this exception, the cases of contagious or infectious diseases have been remarkably few.

Of scarlet fever there have been six cases, four being in one family and two in another; the disease appearing in the latter

family seven days before the quarantine was raised from the former. The two families lived about an eighth of a mile apart and were related to each other. Proper measures were taken by me in each case to prevent the spread of the disease. If my directions had been observed rigidly, I do not believe that the cases in the second family would have occurred.

For the first time in a number of years typhoid fever has appeared in East Haven. There have been only two cases; and, in each, the circumstances showed that it might have been contracted in a neighboring city, where the disease is almost endemic. Certainly, it is an exceedingly rare disease here and that fact is ground for local congratulation.

Complaints having been made of two alleged nuisances, they were investigated, found justified, and abated. Also three other nuisances were abated without previous complaint.

In the matter of garbage and sewage disposal, the same methods prevail as in recent years. In general, these are working well; but in the near future, some improvement will be needed in the more thickly settled part of the town, in the interest of public health. Especially, is there need now of better drainage of the street near the Episcopal church.

The school houses and other public buildings are in excellent sanitary condition; there have been considerable improvement in some respects during the past year or two.

The water supply is derived in part from wells and that portion of it is supposed to be fairly good. The remainder of the water is furnished from Lake Saltonstall.

The public ice ponds in town (three in number) have been examined and found in good condition.

The customary practice of the past still prevails in the efforts of milkmen to ensure a good quality of milk for public consumption.

Facts having shown conclusively that the prevalence of that terrible scourge, pulmonary consumption, is due in large measure to the prevalent careless expectoration of those suffering from that disease even in its earlier stages, accordingly, your health officer, acting in conjunction with the health officers of New Haven and other towns, made and promulgated rules forbidding expectoration in public buildings or street cars.

EAST LYME—DR. FREDERICK H. DART, *Health Officer.*

With the exception of a very general epidemic of measles, one case of typhoid fever and one case of whooping cough, the town has been free from contagious and infectious diseases.

The epidemic of measles, although extensive, was of a mild type, with but few exceptions. The prevailing belief that measles is an innocent disease and the sooner children have it the better, renders it almost impossible to check its extension.

All school houses have been cleaned and disinfected and their wells and privies are in a sanitary condition, as are also all public buildings.

The water supply is entirely from wells and in the thickly settled parts is a constant menace to the health of the community, many wells probably being contaminated.

No ice ponds have been condemned as the three from which ice is taken at present are without doubt free from contamination.

All of the dairymen realize the importance of cleanliness, both in milking and in the care of utensils used. Some have commodious and well ventilated stables, while others are less fortunate in that respect. Immediate cooling of the milk is practiced by the greater number while the sanitary arrangements in all cases are good.

EASTON—B. W. WHITE, ESQ., *Health Officer.*

But few communicable diseases have been reported to the health officer.

Only three cases of measles and two of scarlet fever. The scarlet fever cases were of an apparently mild type; each case in a different family, was duly quarantined and the regular form of disinfection and fumigation of the inhabited apartments was carried out and no extension of the disease occurred.

This process of handling diseases of a communicable sort, is being more and more evident as producing good, and is being more appreciated by the general community than hitherto; the people being earnestly ready to welcome means to render them immune to dangerous diseases.

Tuberculosis still goes without effectual effort to narrow its invasion. More energy should be employed in the building

of public hospitals throughout the country where the poor unfortunate tubercular patients could be treated without spreading their products of disease and degeneration to be hatched and developed in new and innocent subjects.

One nuisance after another is being eliminated as fast as they come to my notice; one was reported lately of a pig-pen located upon a brook carrying water into a reservoir which is part of the water used by the city of Bridgeport. I ordered the owner of the place to remove the nuisance at once.

Inquiry about the sanitary condition of school houses and ice and water supply shows the same to be in as healthful state as ordinarily expected and hitherto seen.

I do not know of any milk peddler who has changed his customary practice of handling and serving this delicate and so substantial article of diet; all dairymen declare they are scrupulously clean about utensils, ventilation of stables, the act of milking and cooling the same immediately, etc., but I have no personal knowledge to mark the degree to which this is done; though I think an allowance derogatory to these statements admissible.

The latest matter brought to my attention by a member of a school committee was report of a skin disease which was thought to be of a contagious character, and one designed to break up or suspend operations in one of the district schools; but a fourteen-mile drive and a visit to the ones afflicted, with a certificate given them that they might attend school seemed to assuage all doubts and fears.

EAST WINDSOR—DR. H. O. ALLEN, *Health Officer*.

The only epidemic we have had was of measles, and that mostly confined to the Fifth School District. That section of town was nearly laid "*hors de combat*" for about two months, as almost every family where there were children had one or more cases. The schools were not closed, but so many children were kept away by the disease or quarantine that on some days the schools opened with hardly enough scholars to make it worth while to keep them open.

The epidemic received its headway from lack of effective quarantine. Many families had no physician, no report of the presence of the disease was made to the health officer, therefore no quarantine.

Four deaths due to complications were the results of this epidemic. Most people are fearless of the measles from the fact that it is not considered a dangerous disease and expose themselves needlessly, if they would but consider that as many or more people die from complications growing out of the measles than from scarlet fever they would use more precaution.

At the Hartford County Temporary Home there were thirty or more cases of scarlet fever, with no deaths. About town there were a few cases of the disease and no deaths. Only one case of diphtheria was reported, and so far as known no other cases appeared. Typhoid fever was reported in but one instance, the case proving fatal. Respecting consumption, most people are wakening up to the fact that it is an infectious disease and this in time will no doubt work good results.

There have been very few nuisances complained of; a few dead horses have been left unburied during the winter months. These have been the source of complaint, but upon notice the remains have been covered up. No farmer should allow a dead horse dumped on his premises unless the party leaving the carcass bury the same.

The ice ponds which supply ice for public use have been examined; there are but three in town. These are in fair sanitary condition.

The dairymen are conducting the milk business according to the old time customary practice. The animals are healthy, well fed, well housed and well cared for so far as the health officer has been able to observe, and in his opinion good clean healthy milk is being served to patrons.

ELLINGTON—DR. EDWIN T. DAVIS, *Health Officer*.

There was an epidemic of measles in the east part of the town. Two or three cases of scarlet fever occurred during the winter near the Rockville city line; and a few cases of whooping cough occurred.

Only two complaints of nuisances have been made during the year and they were promptly abated on request of the health officer.

The sanitary condition of school houses and other public buildings is good. I think the condition of most of the ice ponds in town is all right.

I have no personal knowledge in regard to the precautions taken by dairymen to protect the purity of milk.

ENFIELD—DR. GEO. T. FINCH, *Health Officer*.

The new system of managing affairs having a direct bearing on the public health of the State has become thoroughly established. Our town has grown accustomed to its workings, the simplicity and effectiveness of the scheme is recognized and appreciated, and I believe that to-day it receives almost unanimous approval. Under its operation there is a power to accomplish results which was entirely lacking in the old system. It is and should be the constant aim of the local health officer to do his work on the most pleasant lines possible, to produce as little friction as possible, and not to antagonize any one unnecessarily, either to himself or the system which he represents. Few realize the extent and scope of the laws which have been enacted in the State of Connecticut for the protection of the public health, and failing to realize this, they do not appreciate the power and authority delegated to those appointed to enforce these laws. It is the part of wisdom and good judgment to respect and comply with a pleasant request to obey a law, rather than be defiant and await a written demand to obey. The request and the demand are equally backed by a power to enforce, and the former is certainly much pleasanter for all concerned. In my personal experience I have had no occasion to appeal to my superior, the County Health Officer. My requests have been met with a very fair degree of promptness. Circumstances, location and general conditions make it impossible to accomplish certain desirable results, and a health officer may be censured because he does not perform the impossible. A small beginning has been made during the year in the elimination of privies. This is an end very much to be desired, and will be worked for more strenuously during the coming year. Wherever there is a sewer accessible to which a water closet can be attached a privy becomes simply an abomination, a threat and a menace to public health, a veritable insult to the ethical and esthetic sense. There are, in every nook and corner of the town, old privies used for generations. The soil in their vicinity has become so thoroughly saturated with filth that it is impossible to clean the vaults so that they will not be

offensive. They are almost as much of a nuisance after they are cleaned as before (sometimes I think more). Some of these are old rounders and I annually receive several complaints concerning each of them. They are of necessity a constantly recurring nuisance, because when cleaned this week they are as bad as ever next week. Upon such as these we propose to make an extensive raid during the next year. They must be done away with if they offend whenever it is possible to accomplish it. As a rule a water closet can be put in a house at a small expense, and the convenience and freedom from annoyance and complaint should tell largely in its favor.

There is the greatest possible need for more sewers in our town. We have in certain portions of the town a very commendable sewer system. The convenience and benefit of these sewers make the need the more marked where we have none. The need of sewers is practically noticeable in Hazardville, and it has become much more pressing since the introduction of the water system. This otherwise delightful little village is honeycombed with ancient cesspools, furrowed with open drains, and injured in many ways by privies. It is no uncommon sight to see the house drain emptying into the street. Geographically, the sewerage of this section should offer no great difficulty as nature has furnished an ideal outlet. It is to be hoped that the near future will see this desirable work accomplished. Hazardville is one of our pretty New England villages and has much to offer to home seekers. A well built and sufficiently extensive sewer system would not only rid the place of much that is unsightly and dangerous to health, but would be the greatest bid for new residents, new homes, new enterprises that could possibly be made. As the situation is at the present time the health officer is very often unable to suggest a remedy when called to investigate a complaint in this section of the town. We have had very little to complain of in regard to the condition of Asnuntuck brook during the year. This ancient stream has demoralized a portion of this town for years. It is such a handy and inviting place to "throw things" that people just can't help doing it. Good law-abiding citizens will carry a piece of paper, an apple core or a banana skin for blocks simply to throw it into the brook. The water has been unusually low and if the rubbish of former times had been thrown in we would have a plague spot.

Twenty-eight cases of measles were reported during the year. Probably as many more occurred, but were not reported. We have had cases of measles almost constantly for the past two years. It is impossible to impress upon people the dangers of this disease and the necessity for observing precautions. Five cases of scarlet fever were reported. They were scattered and the source of infection was not discovered. Ten cases of diphtheria were brought to my notice. A few of them were severe. The origin of the first case is unknown. A physician was called to a case of pharyngeal paralysis, and from the history deduced a neglected case of diphtheria. This case was the undoubted cause of two other cases in another family, one of which was fatal. In eight of the cases the origin was undetermined. One case attended school after the throat was decidedly sore, and at least one day after patches were developed. This before a physician was called. The school-room was immediately fumigated and the desk washed with bichloride solution. No cases followed.

We have had one case of membranous croup and eleven cases of typhoid fever. We were unable to trace the origin of our typhoid cases with any degree of success.

I have had twenty-one complaints regarding existing nuisances of various kinds; all were abated or the conditions modified and improved. My work in this direction has all been instigated by a complaint.

Every room in our town occupied and used by the public schools has been thoroughly fumigated and scrubbed. The major part of the seats and desks have been newly varnished. The closets have been cleaned and limed. The other public buildings are in good sanitary condition.

Our water supply is a source of pride and gratification to every user in this town. The Water Co. have done a vast amount of work and have expended about six thousand five hundred dollars on the plant and its accessories. The water now leaves the ground in a delightful bubbling spring, enters a pipe and does not see daylight again until it pours itself into a clean granite paved reservoir. This small reservoir is so constructed that it can be easily cleaned. From this point it is pumped to our stand pipe and delivered to our houses. The company by their present arrangement seem to have eliminated

every chance of contagion. We are enjoying pure wholesome water.

There are in our town no lakes or extensive ponds from which ice might be harvested for household purposes. Our supply comes from the Connecticut River, and from two ponds made by holding back the water of a good sized brook which enters the river at Thompsonville. The river ice is cut near the Suffield shore, well outside and beyond the current, and should be reasonably pure. The brook water shows a high percentage of purity by analysis and should furnish a good quality of ice. I have made personal examination of each locality where ice is cut and find no reason to condemn any of them. Ice is often an unsuspected source of serious danger to public health. There are few bodies of water capable of furnishing absolutely pure ice. Ice water made by melting pieces of ice in water had better be avoided. Any of the disease producing germs may be introduced into the body in this way as they resist freezing markedly.

I have not made a personal inspection of all the barns in our town where dairy cows are kept. A few I have visited, while I do not pretend to an ability to specify particulars of improvement regarding methods of milking, immediate cooling and care of milk, ventilation and cleanliness of utensils used, I do claim that my observation has demonstrated to my mind a very fair degree of improvement along all these lines. Men who are in the milk business for the money there is in it appreciate more fully the weight of public sentiment. The agitation regarding tuberculous cows, ill ventilated stables, and a filthy careless method of conducting all the processes in handling milk has had its sure effect. The public is beginning to ask questions and the wise milk dealer is getting ready to answer them.

Two lines of pipe have been added to our sewer system during the year. The benefit derived from these two new sewers will be appreciated over a large area of our village.

In closing this report I wish to emphasize one particular section of the laws relating to public health. Every physician shall report to the health officer every case of contagious disease occurring in his practice within forty-eight hours of his first attendance upon such case. . . . Every householder in whose house any person shall be ill with any contagious disease

shall report the same to the town health officer within twelve hours of the first appearance of such disease, provided no physician shall be in attendance. During the past year numerous householders failed to report cases of measles occurring in their families,—one family failed to report a case of diphtheria and a death occurred from needless exposure. One physician delayed reporting a case of measles and a child was exposed and died as a result. These laws which I have quoted, in part, have a substantial penalty attachment.

ESSEX—DR. A. SHAFFER, *Health Officer*.

The health of the town for the year has been good, except for a widespread epidemic of measles. The number of cases was 178. The death list from this epidemic is small; direct two, and indirectly four.

One case of scarlet fever was reported. It originated in a small epidemic just over boundary line in Westbrook.

The number of cases of diphtheria was thirteen; one death; origin could not be traced.

The number of cases of whooping cough was thirty-two.

Tuberculosis has been more prevalent this year than in the past five years, and it is recommended that some form of State or county inspection should be instituted to discover if any such cows are in our herds. This has been done in neighboring States with positive results toward diminishing the number of cases of tuberculosis.

A number of complaints have been made about garbage disposal. All such nuisances have been abated without trouble of any kind.

The schools have been kept in as good order as possible, and no complaints have been received by the health officer.

The water supply has been remarkably good for such a dry season, and the town has been especially fortunate in that not one case of typhoid fever has been reported.

The sources of our ice supply have been inspected carefully, and are at present in good condition.

FAIRFIELD—DR. W. H. DONALDSON, *Health Officer*.

Fairfield has maintained its good sanitary condition through the past year.

There have been reported forty-two cases of contagious diseases, viz.: measles thirty-three, diphtheria four, typhoid fever three, scarlet fever two.

Of measles twenty-three cases occurred in Southport, all evidently from four primary cases, coming from private schools in Stamford and Norwalk, from Smith College and the fourth from an unknown source. The contagion from the first three cases was apparently confined to the immediate families where it was introduced, seven cases in all. Most of the others were caused by contagion brought home by parents from Bridgeport.

Of the typhoid cases, one was contracted on a summer vacation in the Berkshires; two were due to local conditions.

The typhoid, scarlet fever and two of the diphtheria cases were primary and independent of each other. One case of diphtheria was contracted at a shop in Westport during the outbreak at that time.

It is gratifying to be able to explain the hitherto mysteriously excessive death-rate of the town, which has been figured upon a population of 3,900.

The census of 1900 gives the town a population of nearly 4,600, which very materially reduces our death-rate of past years.

During the year ending September 1, 1900, there were sixty-five deaths; giving a death-rate of 14.1.

In 1898 and 1899 the deaths numbered seventy and seventy-three respectively.

Over one-half of the deaths were under five or over seventy years of age; fifteen were less than one year and the same number over seventy years old. Two were in their ninety-second year. There were only seventeen deaths between the ages of ten and sixty.

Tuberculosis claimed only four victims; pneumonia five, and typhoid fever only one. La grippe and intestinal diseases caused the largest number of deaths.

There were eighty-five births; seventy-six living. Males forty-four; females forty-one. Giving a living birth-rate of 16.5.

Only four complaints of nuisances were received, all of which were abated. A much better attention to sanitary conditions is being given throughout the town and a generally more intelli-

gent interest is evident. The greatest laxity is noticed in the case of outhouses, and this is more noticeable in our schools, which ought to serve as models.

The rapid building up of a summer community along our beach has caused a very unsanitary condition that menaces the health of those who come there to recuperate.

Some method of garbage and sewage disposal will have to be established hereafter.

Several of our schools are still without a water supply. Thus in two important necessities our schools are sadly deficient, both in themselves potent factors in instruction. A system of earth-closets ought to be provided without delay.

There are now good prospects of our soon having an excellent town supply of water. This will reach only a few of the schools, others should be provided with new wells at once.

The ice and milk supply continues very satisfactory. Dairy-men generally are better informed in sanitary requirements and are using better methods in care and feeding of stock and in the care and handling of the milk. Most of them now use processes for the immediate cooling and careful keeping.

Moody's mill pond nuisance is now receiving the attention of the Bridgeport Board of Health and will soon be abated.

FARMINGTON—DR. JOHN B. NEWTON, *Health Officer*.

The prevalence of infectious diseases in the town of Farmington for the past year has increased somewhat; at the present time, however, none are known to exist, having run their course with but few fatalities. An epidemic of measles numbering fifty-eight cases; diphtheria twenty cases; pertussis fifteen cases; typhoid fever three cases; scarlet fever two cases, being the number reported. Several cases of measles and whooping cough have been discovered in families without medical attendance, such cases when found being put under the same restrictions as when properly reported. All houses having contained diphtheritic patients have been fumigated with sulphur, and on two occasions where scarlet fever has been found formaldehyde was used. All contagious diseases have been mild in character, and have not necessitated the closing of schools. As to the infectious diseases, diphtheria was most virulent, and running a prolonged course. No cases of diphtheria have been

contracted from those already infected, but without doubt have developed from bad drains (?), etc., so much from lack of sewers.

Of pulmonary consumption only three or four cases are known to exist in town.

Ten nuisances have been reported, and all but one were promptly abated without further question; this one in particular being reported to the County Health Officer for final settlement; one nuisance has been abated without complaint.

As to the school houses, water supply and ice ponds, I have made a personal inspection of them, and find all of the school houses without exception this year to be in good sanitary condition; and the water supply and ice ponds to be quite free from pollutions or inorganic constituents.

The milk supply of our town is most excellent in quality, being brought in by reputable dairymen, all of them taking extra precautions to protect the purity of their milk, such as immediate cooling and absolute cleanliness.

FRANKLIN—DR. E. L. DANIELSON, *Health Officer*.

There were two cases of scarlet fever reported; other cases had existed which were not recognized until afterward; one of severe character which terminated in death; the other of so mild a character as to escape notice. The contagion was received from another town, where one of these children had made a short visit.

One case of measles was reported. It was brought here from New York. It was of mild form. One case of diphtheria was reported. This was due to a defective sewer. All of these cases were promptly placarded, and fumigated when disease was over.

Garbage is burned.

The sanitary condition of the majority of schools have improved, but the outhouses connected with some of them do not yet receive proper care. The sanitary condition of other public buildings is good.

Owing to the long continued drought the water supply is not as good as usual, either in quantity or quality.

Ice is procured in great part from running streams, and is of good quality.

This town furnishes cream to the Lebanon Creamery, and since the commencement of that industry there has been many changes in methods of feeding and milking, cooling and care of milk, cleanliness and care of stables and utensils used.

GLASTONBURY—DR. CHAS. G. RANKIN, *Health Officer*.

The year just closed has been characterized by an unusual prevalence of contagious diseases.

There have been reported to me six cases of measles; these have been isolated; the origin was from other towns.

There were thirteen cases of scarlet fever reported; they were about equally divided between the very severe and the mild type of cases—fortunately there were no deaths.

There were seventeen cases of diphtheria; nine of them in the First District. We were unable to ascertain the origin of this outbreak, as the first case occurred near the close of the fall term, and as the school had been exposed, it was decided to close the school at once. The school house was thoroughly fumigated and cleaned, but on opening the school the disease broke out again. This time a thorough examination of all the children was made and all suspicious cases were detained at home. No further cases developed. There were six deaths, a mortality of over thirty-five per cent.

There were reported four cases of typhoid fever with one death.

But few complaints have been made and my suggestions have been carried out, without objection, in all cases.

The sanitary condition of the school houses of the town has improved very much during the last few years.

I have visited the stables of the three largest producers of milk for public use, at least twice during the past year. Found their stables light, well ventilated and clean, and the cows clean, healthy and well cared for. More than ordinary care is taken with the utensils. In all cases the milk is sold *without* cooling.

All the public ice is cut from ponds and as free from contamination as it is possible to have it.

GOSHEN—DR. J. HOWARD NORTH, *Health Officer*.

The health and sanitary conditions in the town of Goshen since the last report have been fully up to the average of a

few years past, and in some respects better, owing, in a great measure, I believe to the existence of the State Board of Health, with its subordinate county and town officers; for while the ordinary official duties of the health officer of this rural, hill township are in no wise extremely onerous, the constant reminders that the people have, by way of the various reports of the doings of the State Board and its various officers, tend to keep the inhabitants more and more in touch with said Board and to influence them to act cheerfully in concert with its efforts and duties for the public weal.

Diseases—There has been no prevalence of any diseases during the past year, one isolated case of measles, one of diphtheria and one mild case of typhoid fever, just now convalescent; all other illnesses were such as are incidental to the varied conditions of persons, habits and general environment.

Consumption—There has been no case of pulmonary consumption observed within this township during the past year, and I know of no case of tuberculosis that exists, or any disease that has been ascribed to milk infection, though there is no special public action in regard to the milk supply, other than the fact that most of the dairy products go either to the creamery in form of cream to be there manufactured into butter, or the whole milk to the cheese factory, though many farmers manufacture choice butter and market it themselves in nearby towns and to supply private customers, consequently all are more or less inspired to produce only the most reputable articles.

Nuisances—Have had no formal complaints of nuisances. My official duties are mostly limited to answering questions that might be propounded by people interested in the better sanitation of their homes, and the hygiene of their families and the community.

Other topics—Garbage and sewage disposal, care of contagious diseases, sanitary conditions of the school houses and other public buildings, water supply and ice ponds are the same as last year.

In regard to milk the farmers individually and naturally endeavor to improve in the method, quality and quantity of its production.

In the main, I believe this town fully up to the average as to public health and the people cheerfully acquiesce in all

means employed by the State and its officers, for the preservation of health and promotion of sanitary conditions, both public and private.

GRANBY—DR. ALFRED J. WEED, *Health Officer*.

Since the health officer was appointed for Granby, not one instance can be recalled where the slightest objection was offered to the efforts put forth by that officer in the performance of his duty, but he has in a number of instances been materially aided in the accomplishment of those acts which seemed at the time to be incumbent upon him.

During the year many cases of measles were found scattered throughout the town. The disease, however, was not prevalent enough to be considered an epidemic.

These cases were contracted from one source. A person coming from an adjoining town was sick in transit and spread the disease, this was done before the health officer was notified. A death happened in the family of the health officer, for the doctor told the family in which lived this person who contracted the disease that measles were not communicable and the clothes never carried it to others, therefore the children occupying this infected house attended school, never doubting the false story given ignorantly or maliciously by the medical attendant, hence the malady was spread and as a result the little child of the health officer contracted the disease and that in turn developed into croupous pneumonia, and in spite of the best medical skill in Hartford the child died.

Throughout the year no other specific diseases have been observed.

The sanitary condition of the school houses compare very favorably with the school houses in other towns.

In most of our districts the school buildings are in a very fair state of repair, and are unquestionably very comfortable for its inmates, still there are several districts in town in which the school houses are rather dilapidated and certainly not comfortable for the pupils.

Several complaints of nuisances have been made and abated.

Each householder has ever been anxious to remove his garbage in his own way for personal reasons, either by distroying it by fire or by burial.

The ice is taken from Lake Mallancakuss or Granberry pond, the greater part of it at least, a body of pure crystal water, entirely surrounded by a dense forest, except at its extreme southern terminus, where is situated a grist mill, and from where the ice is taken.

This lake is fed by springs arising far up in the hills, from Mt. Manitook, where no pollution exists or was ever known to exist.

The water supply is from the safest running crystal streams flowing down the mountain sides, conveying it to the little village reservoirs, thence to be distributed to the people.

GREENWICH—DR. LEANDER P. JONES, *Health Officer*.

There have been reported the following diseases: measles eighty-five, scarlet fever fifteen, diphtheria twenty-six, typhoid fever eight.

We had a small epidemic of measles in April and May which originated from a single case in one of the schools.

The cases of diphtheria were mostly original cases, but in a few instances in one of the tenement districts the instructions of the health officer were disregarded and we had secondary cases.

Of the eight cases of typhoid fever reported, four had their origin out of town and four were people who had been here continuously. No connection could be traced between the home cases.

There have been very many complaints during the year and where possible they have been abated. The people in East Port Chester are in continual trouble from nuisances. This is due to the large foreign population in the district who keep their places in a very unsanitary condition.

The garbage is collected in the borough limits. Some of it is used as food for hogs and some is buried.

In the borough we have sewers, but the outlying districts depend on cesspools.

The public buildings and school houses are in a fairly sanitary condition.

The greater portion of the milk supply is well looked after, but it is difficult to trace the small dealers. We have never had any trouble from that source however.

GRISWOLD—DR. GEORGE H. JENNINGS, *Health Officer*.

Measles—From January to April there were twelve cases reported—all were in the eastern part of the town. The disease was unquestionably brought from the neighboring village of Voluntown, where it had been very prevalent. The disease was of a mild type, and there were probably a number of cases where there was no medical attendance, and so were not reported.

Diphtheria—Two cases were reported. One was of severe type, the other mild. The patients were isolated and the rooms occupied by them thoroughly disinfected.

Typhoid fever—Two cases were reported. One was on a farm and the other in the village. The source was not ascertained.

No complaint of a nuisance was received.

Drainage—During the past year the Glasgo village has laid new sewer pipes. The new system gives a much better drainage than the old.

During the summer vacation the school houses were inspected. With the exception of two they were found to be in good condition. The sanitaries were in a very bad condition, such as would not be tolerated by any private family. The need of repairs in both the school houses and sanitaries were very apparent. In the Glasgo school the primary room is not as large as it should be to accommodate the number of pupils in attendance.

In view of the probable change in the Glasgo school, and the possible changes in some of the other schools in town, it will not be out of place to mention some well established facts regarding the health and comfort of the pupils:

First, as to heating: All the schools in town are heated by stoves placed in the rooms; a jacket placed around the stove starting about six inches from the floor and reaching a little above the top of the stove is of great benefit; there is a constant current of air in the space between the stove and jacket; this is warmed as it rises, and is carried to the ceiling, where it is deflected outward and is diffused throughout the room. The pupils farthest from the stove receive the heat and those closest to the stove are protected from the intense heat that is otherwise thrown directly out.

Second, in ventilating: A tight fitting board, ten inches wide, placed at the bottom of the lower sash gives an upward current to the air that will enter when the lower sash is raised, protecting the pupils seated near the window. There should not be less than 120 cubic feet of air for each pupil; this to be replaced with fresh air every fifteen minutes.

Third, as to light: The amount of window space should never be less than one-sixth, better one-fourth, of floor space. Windows should reach as near the ceiling as possible and should not come nearer than four, better five, feet of the floor; this gives a slanting light on the pupils' desk. Windows placed on the south and north sides of the room are preferable to east and west as the sun's rays are less slanting. Seats should be so arranged that the light will fall over the left shoulder or from behind. The seat farthest from the window should not be more than one and a half times the distance from the floor to the top of the window.

It is of the highest importance that the purity of the milk should be closely looked after. While it is to be believed that all are anxious to supply pure milk, yet some system of inspection and set of requirements should be established and enforced that this great food supply may reach the consumer in as nearly a perfect condition as possible. The present practice of cleaning the milk cans is open to criticism. The question of our milk supply has attracted attention generally throughout the State, and it is believed by many that the best results would be attained by an act of the Legislature, relative to daily inspection, such as is now in force regarding factories, bakeries, etc., and that such a step would be welcomed both by the consumer and by all honest dairymen.

GROTON—DR. JOHN GRAY, *Health Officer*.

Excepting the reported two hundred and eight cases of ordinary measles, seven of scarlet fever, eleven of diphtheria and three of typhoid fever, occurring in the winter, spring and summer months of the year, the general health of the people was phenomenally good; and I may add, that physicians in town say, remarkably so, and attribute their non-fatiguing professional labors to the improved observance of health laws and abatement of unsanitary conditions.

The contracting source of the measles was at a public gathering, where a person from out of town was present that had premonitory symptoms of the ailment, and infected scores from all parts of the town, which soon developed into a wide-spread epidemic, and in a comparative sense, it seemed like the invidious and surprising attack of the British on Fort Griswold in 1781, with no time or opportunity to check the force of invasion. However, every effort was made, under the law, to combat and limit its progress, with but partial success. In my opinion the ailment should be as thoroughly quarantined as any other contagious disease, and hope the practice will be made as obligatory.

The eleven cases of diphtheria were of a malignant and semi-malignant type, five were primary and six secondary; two were contracted out of town and nine within; four were treated with antitoxine and no deaths occurred; four were under Homeopathic treatment and one death resulted.

All of the seven scarlet fever cases were of the anginose form, four primary and three secondary. Each disease was kept thoroughly isolated, disinfected and quarantined, and no local unsanitary conditions were found to aggravate either ailment.

One of the three typhoid fever cases was very serious and complicated with malaria.

But little malarial sickness was known in town during the year. La grippe was quite prevalent in the winter and spring months, with less severity than formerly in most of the cases.

In the middle of August I inspected all of the public buildings in town and their premises, and found the major part of them in a satisfactory condition. Some of the school houses and nearly all of their water-closets were in a very unsanitary state, from long standing uncleanness and offensive excrementitious accumulations. In my judgment, for the preservation of health and a correct observance of health laws, the school houses and their water-closets should be cleaned up and disinfected at the expiration of the spring term of school and kept well aired from time to time during the summer months, instead of leaving the important work to be done just before the autumn term of school commences. In this connection, I feel it to be my duty to substantially repeat what I have said in a previous report, that a proper ventilation should be provided in every school room, without being obliged to open

the lower half of windows and expose scholars to take cold; and I hope the several districts not so furnished will soon acknowledge the importance of the matter by giving it their favorable attention.

On complaint, I have abated twenty-one nuisances of various kinds to the satisfaction of all parties concerned, except in one instance of a bone fertilizing establishment of long standing, located in the woods about one-half mile east of Groton Bank Village, which I relicensed in July conditionally, that if the business became objectionable and detrimental to health, then the license was to cease. Just before the license was issued, two or three persons complained to the selectmen and myself, that occasionally the odor from the establishment was offensive when the wind blew from a certain direction, and requested us together to inspect the premises, which we did, in the interest of health and equity, and after a thorough examination of the works, and justly considering the complained of odor that occasionally came from them, we unanimously reached the opinion that there was not sufficient odor from them so objectionable as to warrant the business being broken up and virtually destroying much capital invested. Therefore, the license granted continues in force.

In my last annual report I spoke of the doubtful purity of the water in some of the wells at Groton Bank, and I am gratified to learn that the question of having a system of good water and sewerage is now being favorably agitated by the citizens of the place, and I hope that ere another year has passed, to have the pleasure of congratulating the people on its accomplishment.

In concluding this report it seems pardonable for me to publicly express my great appreciation for the generous and sustaining courtesies shown me by physicians and people in performing my delicate official duties, for which I herewith tender them my grateful acknowledgment.

GUILFORD—DR. REDFIELD B. WEST, *Health Officer.*

The usual epidemic of influenza occurred during the colder months and malarial diseases in its various forms in the spring, summer and fall.

Scarlet fever appeared at Leete's Island in November, fortunately not spreading beyond three houses and with no fatal cases.

Five cases of diphtheria occurred with no fatalities. I believe that the antitoxine was used in most of these cases.

Three cases of measles were reported. One of these cases was exposed to the contagion in New Haven. In the others the source was not located.

One case of typhoid fever in June, probably contracted elsewhere. No other contagious diseases have been reported.

Patients having pulmonary consumption are in no way restricted except that they should expectorate into a receptacle that can be disinfected or destroyed.

Sewage is disposed of mainly by means of cesspools.

The public buildings and school houses are in good sanitary condition. An improvement in some of the school houses being especially noticeable, in one or two, however, there is some need of repairs.

There is an improvement in our water supply inasmuch as those who desire it can now obtain water from the street mains leading from a lake near Clinton.

Ice for household use is obtained in Guilford from the town mill pond and in North Guilford from a small pond, these sources seem as good as the average, as no objectionable drainage flows into them.

In most cases of nuisance a word of advice has been sufficient to cause an abatement and in one or two cases only have further measures been necessary.

HADDAM—DR. LEROY A. SMITH, *Health Officer*.

There have been only a few cases of whooping cough reported to me.

I find that the sanitary conditions of the school houses, in most instances are good.

HAMDEN—DR. HENRY H. SMITH, *Health Officer*.

Hamden has been more than usually exempt this year from severe epidemics of any kind and malarial diseases have been fewer and less severe than usual.

No cases of measles have been reported and but six cases of scarlet fever—these all of a mild type with no deaths. We have had four cases of diphtheria with one death. During the spring and summer whooping cough was prevalent, but only

two cases were reported, as most of them were light and a physician was not consulted. Seven cases of typhoid fever were reported, five of them in the Mt. Carmel Children's Home. A most searching and thorough examination of the premises, drainage, plumbing, water and milk supply failed to give any clue to the cause. These cases ran a mild though protracted course and all terminated in recovery. None of the other contagions or rare diseases were reported.

Pulmonary consumption claimed its usual number of victims, but no case originating in the milk supply has been noticed. The only restrictive measure to prevent its spreading adopted in this town is a regulation to prohibit expectoration on the floor or platform of the street cars passing through the town. This regulation has been in force since February last and has limited the practice to some extent.

Cases of nuisances have been less than usual; only four complaints were received, all of which were promptly and satisfactorily adjusted. We have one ever present and long standing nuisance which still continues, and that is the large pig sty in the Highwood district which has been for years, and still continues to be, the dumping ground for the greater part of the garbage from New Haven. This foul and decomposing mass is here fed to swine. The stench from this putrid material, which these helpless creatures are obliged to eat, poisons the air for a mile in every direction. The meat from hogs eating such food can only be diseased and poisonous and should not be used as food for man. This being a farming community the greater part of the sewage is used in some way as a fertilizer.

In the more thickly settled portion the cesspool is the only way. There has been no great improvement over past years in the methods of disposal, but greater care is generally exercised in cleaning up the premises.

The school houses are in good sanitary condition, provided with good outbuildings, kept clean and healthful, except that at Augurville, which is in a low, damp spot, where the river in the spring flows up around it, and the one at Whitneyville. The Augurville school house can be made sanitary and healthful by moving it to higher ground, where it could have the sun, but the Whitneyville building is old, dilapidated, unsanitary in every way and should be abandoned and a new building built upon

higher ground. The only other public building is the Town Hall, which is a comparatively new building, and which has recently been put in thorough repair.

The water supply is from wells and cisterns. Many of the old stoned wells have been spoiled by surface drainage into them, but the recent ones are bored and have iron pipe driven through the soil into the solid rock, thus affording protection against surface contamination and furnishing an abundance of pure water. The four ponds from which ice is taken were all carefully examined and found to be free from every source of contamination.

I think all our milkmen are much more careful than formerly in the care and handling of milk. Two at least, and perhaps others, clarify their milk by the centrifugal process, thus separating out almost entirely the impurities. It is the general practice to wash the teats and udders of the cows and to wash the hands at the milking, to immediately put the milk into clean cans and put those cans into ice water or very cold water.

The stables that I have examined have been kept reasonably clean in a gross way, but have no refinement of cleanliness as they should. They are very poorly or not at all ventilated, they are overcrowded and they are too low to afford proper air space for the number of cows.

I have personally inspected many dairies and stables and in most of them great care is taken to keep the utensils clean and sweet. Brewery grain is used to a greater or less extent as an article of food for cows.

I believe this should be prohibited as it is injurious to the health of the animals and produces a poisonous milk.

HAMPTON—DR. L. W. SPENCER, *Health Officer*.

The health of the town has been very good, excepting a mild epidemic of whooping cough; nearly every child has had it.

The death-rate has been about on an average with other years. Births have been very few.

Three complaints of nuisances were received, investigated and promptly abated.

The school houses are all in good sanitary condition.

Our water supply is from wells, but on account of the very dry weather, they are very low, a number being entirely dry.

Have had quite a number of diarrhoea cases, owing to the poor condition of the water.

Our milk supply is good, and all sent to Boston every morning.

In my opinion we have a model town, as all try in every way to help me in my efforts to keep everything in a clean, sanitary condition.

HARTLAND—WILLIAM S. MILLER, ESQ., *Health Officer.*

The past year has been unusually healthy. There has been no contagious diseases or nuisances reported to me.

Sanitary condition of school houses good.

HARTFORD—DR. THOMAS F. KANE, *President of City Board of Health.*

I beg leave to report that during the past year we have had more cases of typhoid fever and diphtheria than during the previous year. In January and February, an unusual period, we had quite a few cases of typhoid fever, due to the use of Connecticut River water for drinking and household purposes. Ninety-five per cent. of the cases reported were in the district supplied with river water, thus proving conclusively the source of the infection.

There has been a greater number of cases of diphtheria during the year than we would wish to see. In October, 1899, the Board of Health made a decided advance in the right direction for the control of contagious and infectious diseases by inaugurating a systematic school inspection. Each school, public and private, is visited weekly by one of the medical inspectors, and any pupil showing any sign of a contagious or infectious disease is immediately excluded from school and not allowed to return until furnished with a certificate by the inspector that all danger of infecting others has passed. Particular attention is paid to the examination of the children's throats. In any suspected case, a culture is taken and if the Klebs Loeffler bacillus is found the child is sent home with a card advising the parents to consult their family physician. A pupil once sent home is not allowed to return to school until the bacteriologist reports that the throat is clear and there is no further danger. We class all cases showing the Klebs Loeffler bacillus under the head of diphtheria, even though the child is not, apparently, ill. Thus,

during the school term, we often times appear to have more cases of diphtheria than the clinical facts would seem to warrant.

The medical inspectors make a house-to-house inspection in the poorer sections of the city during the heated period and furnish the parents with circulars printed in the English, Yiddish, and Italian languages, concerning the proper feeding of infants. This we have found to be of inestimable value, as improper feeding kills more infants and young children than all the contagious diseases combined.

The cases of scarlet fever have been few and of a very mild type.

HARWINTON—DR. C. L. BLAKE, *Health Officer*.

The following cases have been reported: Measles forty-five, scarlet fever one, membranous croup one, typhoid fever one. No cases of pulmonary consumption in this town.

Have received one nuisance complaint. The same has been abated.

Where scarlet fever and membranous croup have occurred, premises have been quarantined and fumigated.

Notices, informing public of existence of disease have been posted in measles and typhoid fever.

Sanitary condition of school houses and public buildings good.

The water supply is from wells and springs.

HEBRON—DR. CYRUS H. PENDLETON, *Health Officer*.

There have occurred during the year, so far as reported to me, or as have come to my knowledge, seven cases of measles, which were of moderate severity, and all terminated in recovery. Of these, four were primary cases, and three secondary. Two of the primary cases, certainly, and three, probably, were contracted in Colchester. The other primary cases came from Hartford. The houses in which the cases occurred were placarded and there was no extension beyond the families in which the primary cases occurred.

During the late fall and winter there was quite an epidemic of whooping cough, the larger proportion of the cases occurring in the First School District. Only a comparatively few of these were severe, and there were no deaths. I have estimated the

number to have been in the neighborhood of fifty. The epidemic originated, as near as can be ascertained, from an adult contracting the disease in some town in New London County. It showed itself as a cough without very definite characteristics. A child of his contracted the disease from him and, as she was attending school at the time, it spread among the school children. Whooping cough is perhaps one of the most difficult of the contagious diseases to limit the spread of, from the fact that for a week or more after its onset, and during its most contagious stage, it can hardly be diagnosed with any positive certainty; and from the further fact that, if a case is not especially severe, no physician is called, and no pains taken to notify the health officer, and very little if any precaution is taken.

As regards typhoid fever, there were no cases, unless one case of sickness, occurring in December, of somewhat doubtful diagnosis, should be so considered. This case terminated, finally, in tuberculosis, and ended fatally. Possibly it may have been tuberculosis from the first.

No complaints were made of nuisances, though nuisances might possibly have been found if I had deemed it incumbent upon me to make special search for them.

The public buildings, what few there are, are believed to be in good sanitary condition, unless the outbuildings connected with some of the school houses are to be excepted.

During August I gave notice to the district committees of the several districts to have the school houses cleaned out and aired prior to the opening of school in the fall, and the privies put into a cleanly and inoffensive condition. Some of the committeemen have followed my suggestions, while others have seen fit to ignore them, either wholly or in part.

HUNTINGTON—DR. W. S. RANDALL, *Health Officer*.

One hundred and eight cases of contagious diseases have been reported during the year as against sixteen for the preceding year, these are subdivided as follows: Measles ninety-eight cases, scarlet fever four cases, typhoid fever six cases.

An epidemic of measles occurred during the spring months which was widespread throughout the town. Up to this year no cases of measles were reported for three years, the last epidemic occurring in 1896, when we had one hundred and fifty-two cases.

Scarlet fever to the extent of four cases occurred, but all were rather mild. The source of infection in two of the cases is unknown. In the remaining two it is supposed that it was taken from a child in the neighborhood who had the disease in a mild form. This suspicious case was in the family of an Hungarian and was not reported to the health officer. All these cases ended in recovery. A very noteworthy fact is shown in this report that no cases of diphtheria, membranous croup or whooping cough have been reported.

Typhoid fever occurred as follows: Five cases last autumn and one in June following. Of these six cases two were very severe and protracted, one ending in recovery. Of the remaining four mild cases three recovered. No satisfactory data could be obtained which would account for the origin of the infection.

The usual precautions in the way of disinfecting measures and isolation of patients have been carried out where necessary with satisfactory results.

The total number of deaths in the town (including the borough) was eighty-six, or thirteen more than the previous year. The total number of births in the town (including the borough) was one hundred and thirty-eight, or eighty-nine more than last year.

Tubercular disease has caused nine deaths, or about ten and one-half per cent. of the total deaths, all in the form of pulmonary consumption. So far as is known none of the foregoing cases are attributable to tuberculous milk. In December, 1899, a new rule was adopted in this town in conformity with similar rules adopted by the health officers of the various towns through which the tracks of the Bridgeport Traction Co. pass. This rule forbids spitting upon the floor of street cars, and aside from its aid to cleanliness, is intended to prevent the spread of tubercular disease.

Regarding nuisances, five complaints were recorded for the year. These with one or two exceptions were readily abated and none required legal procedure.

No new methods for the disposal of garbage or sewage have been adopted since the last annual report, although some action should be taken on this matter, especially with regard to those thickly populated streets lying adjacent to the borough.

Sanitary inspection has been carried out in some eight cases and suggestions made, where necessary, along the line of better sanitation.

During the past year eleven public schools in this town have been in active operation. These were fumigated, where necessary, and put in a sanitary condition previous to the opening term. The different schools were all visited by me between September 15, 1899, and January 10, 1900, and found in good condition.

Another exceedingly dry season has demonstrated the necessity for an increase in our water system. The work upon the new reservoir is already well under way and when completed will furnish a very substantial increase to our excellent water supply.

The ice supply harvested in this town for public consumption is obtained only from the reservoirs of the Shelton Water Co., consequently the purity of the ice is unquestioned.

Some of the largest dairymen certify regarding the precautions taken with their milk, that they are careful, first, as to cleanliness in milking; second, as to cooling the milk; third, in the cleanliness of the stable and health of cows, and fourth in the cleanliness of the pails, cans and bottles used in its transportation.

There is no doubt that a higher standard would obtain if there was an official supervision of the milk supply.

JEWETT CITY—DR. GEORGE H. JENNINGS, *Health Officer*.

There have been no cases of contagious or infectious diseases excepting measles, whooping cough and typhoid fever.

In April measles appeared in a family soon after they came here. The disease was brought from another State. Seven of the children had the disease. Although the cases occurred in a family living in a large tenement house where there were several families living there was no spreading of the disease. In June there was one case, the disease was contracted in another State.

Whooping cough was brought here from Voluntown in June; during this month and the two immediately following the disease was quite prevalent; it was of a mild type, the season was favorable to the open air treatment and many cases did not come under the care of any physician, so that the number of cases can not be given; there were thirteen cases reported.

But one case of typhoid fever occurred during the year, this was of a mild form; the origin of the case could not be ascertained.

The public school building was thoroughly cleaned during the summer vacation and is in very good condition.

There were three complaints of a nuisance received. In each case the nuisance was abated on request. There were a number of instances where unsanitary conditions were observed and were readily attended to on request. Advice in sanitary matters has been quite frequently given upon request of a number of resident families.

The water from the reservoir that supplies many families had, during the hot, dry season frequently a disagreeable odor and a peculiar color. The color was at times sufficient to prevent its being used for washing purposes; and the odor rendered it of but little use for drinking. Flushing the pipes would be followed by temporary improvement. It is believed that the cause for this condition of the water is the sediment that has collected in the main pipes where there is an up grade, where the ordinary use of water was not sufficient to cause it to be carried on.

There has been no change in the condition of sewers during the past year, excepting that the increase of the village population makes the need of a complete system more imperatively felt.

No personal knowledge by inspection of all the dairies supplying milk to the borough is had by the health officer—some have been visited and found to be in good condition. No systematised plan is in practice by all dairymen. The immediate cooling of milk is practiced, it is believed by all.

KENT—JEROME F. GIBBS, ESQ., *Health Officer*.

There were reported to me during the year seventy-eight cases of measles, sixteen cases of scarlet fever, twelve cases of whooping cough. No other contagious or infectious disease reported.

The school houses are in good sanitary condition.

In the village the water supply is mostly from reservoir fed by springs and brook, outside of the village the supply is from springs and wells.

Garbage in most cases is made into compost heaps as fertilizing material.

Sewerage in the village by private sewer running the whole length of Main street to the river and most of the houses are connected thereto, outside of the village by vaults and cesspools.

The dairymen are very particular in their effort to protect the purity of the milk supply by cleanliness of utensils and by whitewashing of the buildings.

KILLINGLY—DR. W. H. JUDSON, *Health Officer*.

Some six months ago there was an epidemic of measles in the south part of the town which extended to nearly every house, numbering as many as 150 cases, a general quarantine was established, bounded by social limits, schools and church; so that it did not spread out of that section of the town, each family whether seen personally or not seemed to coöperate and keep within the district.

Only three cases of scarlet fever

Some whooping cough, but not epidemic.

We have been unusually free from typhoid fever.

There is no alarming amount of consumption here.

Only three or four complaints of nuisances were made and all were abated.

Garbage is carted away and all the sewage is surface and cesspool.

Sanitary condition of school houses seems to be fair.

Water supply is from wells.

No ice ponds examined, as it was so scarce this season.

I have not personally investigated the milk supply.

KILLINGWORTH—DR. E. P. NICHOLS, *Health Officer*.

In this retired corner of our commonwealth, having neither railroad, telegraph, nor telephone connection with the rest of the world, the past year has been uneventful, as far as regards public health. The effects of grip lingered long into the spring and early summer months. Debility was the prevailing complaint. Everybody seemed to be tired. During the latter part of summer, diarrhoea was very prevalent, almost epidemic. In some families one, two or three cases occurred; in others every member of the household was affected. Most of the cases were of a mild type, accompanied with little or no pain, and yielded

readily to treatment. But one death occurred from this cause—that of a child who had always exhibited irritability of the nervous system. Head symptoms developed after three or four days. There were slight contractions of the muscles of the hands, but no real tonic spasm. The cases were not confined to any one locality where the wells were low, and no case showing typhoid symptoms came under my observation. Sudden changes in temperature—cool nights after very hot days, might account for the prevalence of the disease.

On three or four days during the summer the mercury rose above ninety, but as there was always a breeze, we have suffered little from the heat.

No cases of infectious diseases have been known to the health officer. A few mild cases of whooping cough occurred, which were treated with domestic remedies.

Tuberculosis is so rare, nothing has ever been done to restrict it.

On our “broad acres,” garbage and sewage are easily disposed of, without detriment to health.

The sanitary condition of the school houses is good. The public buildings are well cared for.

Usually the water supply, from wells, is abundant and good. This year the water in many wells has been low, and some are now dry.

No examination of ice ponds is necessary, as they are fed by streams running through the woods, and there are neither factories nor closets to contaminate them.

Almost every family is supplied with milk from its own farm, and the country farmer generally uses the best of milk. The extraordinary drought of this summer, drying up the pastures, has diminished the supply, but it affects the farmer only in the production of butter.

LEBANON—DR. E. L. DANIELSON, *Health Officer.*

There were two cases of scarlet fever, one of typhoid fever and several cases of measles and whooping cough. All these cases were contracted from outside of Lebanon. In each instance the houses were placarded, the patients isolated and the premises disinfected, after recovery. None were fatal and there was no other infectious disease reported.

Two complaints of nuisances have been received; lice on children in School Districts No. 5 and No. 8. They were investigated and abated. Garbage is burned.

Sewage is conducted away by drains; very little improvement of past years.

The sanitary condition of the majority of the schools is good, although some of them still neglect the proper care of the outhouses connected with them. The sanitary condition of other public buildings is good.

The water supply is usually very good, but the long continued drought has greatly changed it in both quantity and quality.

The greater part of the ice used here is procured from running streams and is of good quality. Since the Lebanon Creamery started there has been great changes in methods of feeding and milking, cooling and care of milk; cleanliness and care of stable utensils used. I think the quality of the milk will compare very favorably with the majority of the towns of Connecticut.

LEDYARD—DR. N. B. LEWIS, *Health Officer*.

During the past year no epidemics of importance have occurred in town.

Six cases of scarlet fever, four cases of measles and five of typhoid fever reported during the year; three cases of typhoid fever occurred in one family, with one death. The water used by the family was suspected and samples were sent the State Chemist for analysis. Intestinal germs were found in the samples sent. The family were notified of the fact and advised to fill up the well.

During the year two cases were reported by a number of persons as nuisances, which were abated after much difficulty.

LISBON—HENRY LYON, ESQ., *Health Officer*.

There have been reported eight cases of measles; origin from an adjoining town.

There have been two cases of diphtheria, one proved fatal. It is believed that the diphtheria was brought here from an adjoining State.

Of garbage disposal and sewage disposal no improvement.

Sanitary conditions of the school houses and of other public buildings are good.

The water supply is somewhat limited at the present time on account of the extensive drought. Many new wells dug and many old wells driven deeper. Ice ponds, none examined.

There is no extra precaution beyond the practice of the past to protect the purity of milk.

TOWN OF LITCHFIELD—DR. CHAS. L. PAGE, *Health Officer*.

Measles and scarlet fever—Several mild cases. Quarantine rules were enforced and no secondary cases occurred.

Whooping cough—A few cases during the summer.

Diphtheria—In February a number of children in the East Litchfield district were taken sick with this disease. The school was closed and a rigid quarantine enforced. No new cases were reported.

Typhoid fever—One case reported. Every year we see less and less of this disease. As the cause is known and the methods of prevention so simple that in a few years typhoid fever will be classed among the rare diseases.

Complaints—One, which was promptly abated.

Garbage and sewage—Is disposed of in the same manner as in all farming districts.

The sanitary condition of our schools and public buildings is good.

BOROUGH OF LITCHFIELD—DR. CHAS. L. PAGE, *Health Officer*.

Measles—Several cases during the year.

Whooping cough—A few mild cases during the summer.

Typhoid fever—Three cases reported.

Complaints—Eight, which were abated.

The garbage is collected and fed to swine.

The sewerage system is good.

The sanitary condition of school and other public buildings is first class.

The water supply is excellent.

The ice supply is taken from a running stream some distance from the borough and free from contamination.

LYME—J. G. ELY, Esq., *Health Officer*.

The health of the town for the past year has been fully up to the average. Malarial diseases have lessened in a marked

degree. The small outbreaks of contagious disease which have from time to time occurred, have been confined to restricted areas by quarantine and isolation.

All public buildings and school houses are in good sanitary condition.

No complaints of any nuisances have been received, and none have been abated without notice.

The ice harvested and used in this town is all obtained from unquestionable sources.

The great drought has lowered the water supply to an unusual degree, and there is no doubt that many people are now using water unfit for drinking purposes and dangerous to health. Increased sickness must follow such a condition, if continued long.

MADISON—DR. ALVENO D. AYERS, *Health Officer*.

Measles—Five different families have been reported, and there were at least twelve cases. As no physician was called in some cases the head of the families reported the cases. Other cases were heard of, but I had no personal or official knowledge of them. In two of the cases the origin was in coming in contact with cases out of town. The other cases, all but one, was in the families where the first cases were. One case was that of a party who helped to care for a case.

Whooping cough has been in town, but the cases were those that had had it for a number of weeks and came here to recuperate.

Nuisances—Five complaints in writing investigated; a case of typhoid fever in Hartford; the patient having been at a cottage on the shore; by request of the Secretary of the State Board of Health I procured a sample of the water used at the cottage. Prof. Smith of Yale, reported the water as harmless. I was told that the patient in Hartford was not feeling well before coming to Madison, and that while here defective plumbing was found in the Hartford house.

Two complaints were suspected measles. Children attending school I forbade them going to school, in a few days they were taken ill with measles, which in my mind proved the complaints were timely. The other complaints were leaving carcasses of dead animals unburied; in one case party was convicted and

fined. I find generally the people are willing to abate nuisances, six cases were abated without a regular notice.

Garbage is buried and used upon land.

Sanitary conditions of all school houses and public buildings good; no need of fumigation of any of them.

The water supply is the same, but as the Guilford Water Company has nearly completed its pipe laying, it seems to me a better system of sewerage is in sight, and a better supply of water can be put into the houses.

Four ice ponds were visited; none condemned. Swampy grounds are near some of the ponds, but as there is no bad drainage into them I do not believe that there is any probable danger in using the ice.

I believe milk inspection desirable. A great improvement has been made in using glass containers for the milk.

MANCHESTER—DR. MARK S. BRADLEY, *Health Officer*.

No severe epidemic of disease has occurred in the town of Manchester during the year.

The few cases of measles that have broken out from time to time could be traced to some out-of-town source of contagion. While there have been thirty-one cases of scarlet fever reported, they have been scattered over the year in such a manner as to have a few cases each month, six being the largest number of cases for any one month. Diphtheria and membranous croup seemed to threaten an epidemic in January and February. At the Ninth District School the throats of many of the children were examined, and all those suffering from sore throat were ordered sent home at once. There have been a few scattered cases at other times. Nineteen cases have been reported. There has been but little whooping cough compared with other years.

A few cases of typhoid fever made their appearance the latter part of August and the first of September, but fewer cases than have been for several years past, and many less than last year.

An ordinance has been enacted forbidding persons spitting on the floors of the trolley cars and public halls. It will also help to educate the people in the dangerous nature of the sputum

of the consumptive. No case of consumption has been traced to tuberculous milk.

The death-rate of the town has not been excessive.

Thirty-one complaints of nuisances have been received, and thirty abated.

As a rule people have been more careful about the disposal of their garbage during the last year than previously. The garbage heap next the back door is not quite as prevalent as heretofore, but there is still a large number of back yards with ornaments of that nature. The house-to-house collection of garbage has not yet been established, much as it is needed.

The magnificent sewer plant built at the south end by the generosity of the Cheney Brothers has not yet been completed. It was expected to have the plant in operation early in the summer, but it was found that the engineer's estimate of the number of filter beds was insufficient for the amount of sewage, and new beds are being added. It is hoped by the contractors to have the plant in operation in October. When the new filter beds are opened the south end of the town can boast of having as perfect a system of sewers as any town in the country. In striking contrast the north end stands out with the worst possible combination of city water and no sewer system. The only sewer being one laid from Cowles' Hotel and taking in a part of North School street, including the Eighth District schoolhouse. This sewer was built and is maintained by Clinton W. Cowles, Esq. The part of the north end which is as thickly settled as the south end of the town is known as the Eighth School District.

Nearly every house has a cesspool. A large part of them are poorly constructed and rarely emptied. The manufacturers using large amounts of water find it impossible to make even a series of cesspools, anything but a nuisance. The smaller cesspools are constantly becoming objectionable. It would seem that the time has certainly arrived when the Eighth School District should put in a sewer system. Nothing is as badly needed at the north end.

There is another grave mistake being made over the entire town, that of putting in cheap and imperfect plumbing. Much of it is put in by men who know their work would not stand a test, but put it in on a demand for a cheap job. Anything that looks like plumbing seems to be good enough for some jobs.

Persons should learn that the cheapest plumbing is the most expensive in the end, more especially if they need live in a house with it. There is no reason why Manchester should not have a plumbing inspector as well as the larger towns.

The sanitary condition of the school houses is excellent. Each District Secretary was notified by letter in August to have the school houses put in proper shape for the fall term, but all with one exception had done so before receiving the letter. The sanitary condition of the public buildings is all that can be desired.

We believe that the water supply of the town will compare favorably with any in the State.

Four ice ponds have been examined, and none condemned.

The milk supply of the town comes mainly from the towns of South Windsor, Bolton and Vernon. The milkmen in town receiving it in bulk for house-to-house distribution from many small farmers in the above mentioned towns. It is doubted if these farmers take any precaution beyond the customary practices of the past to protect the purity of the milk. A large part of the skim and the butter milk comes from the Wapping Creamery. At the largest milk farm in town every precaution is taken to give the consumer the best of milk. Care is taken to have the hands and clothing of the milker clean. No milk is allowed to stand in the stable after milking, but it is at once passed through an aerator when it is cooled and strained. The stables are well ventilated and cleaned, and the cows given nothing but pure water to drink. The utensils are scalded and dried in the sun after using.

MANSFIELD—DR. EDWIN G. SUMNER, *Health Officer.*

This town has been remarkably free from all contagious diseases, with the exception of measles. Some fifteen cases took possession of the school at the "Four Corners," near the close of the summer term, none of which proved fatal, nor did the epidemic spread to other localities. Two other cases of measles, both quite remote from the above place, constitute all contagious or infectious diseases that have come to my knowledge, and I think all have been reported to me.

From the fact that we have had but one mild case of typhoid fever, I think it is fair to infer that we are not drinking water contaminated with cesspools or sink-drains.

I have had four complaints of different nuisances, all of which were immediately abated.

Methods of garbage disposal in this, as in most country towns, is not as difficult a question as it is in cities, as the hogs and hens are always ready to dispose of most of it.

The sewage disposal is more difficult, and yet I am convinced that the distance between wells, used for drinking water, and sink-drains and cesspools is gradually widening.

The sanitary condition of the school houses has been looked after, and where there have been contagious diseases they have been properly fumigated.

The schools, this year, commence under town management. Whether this will result in an improvement, as to cleanliness, time will determine. Judging from the usual internal conditions of our Town Hall, I have very grave doubts.

As suggested by a recent circular, sent out by the State Board of Health to the town health officers, I spent a day or more among the dairymen of our town, visiting the stables, learning of the methods of milking, cooling and care of the milk, ventilation and cleanliness of stables, cleanliness of the utensils used, etc. In short, the general sanitary condition of the milk as it leaves the stables to be distributed to customers. In my visit I took note of the number of cows kept by each dairyman; and the ten dairies first visited showed an aggregate of 189 cows, all in the south part of the town, and all but one retailing their milk in Willimantic.

In every case visited I found commendable care of all utensils used, such as cans, pails, strainers, etc. Cooling and care of the milk was practically the same in all cases, keeping it cool in water made cool by ice, or in tanks of running cool water, or tanks of cold well water, all arriving at the same thing, viz: keeping the milk cool in warm weather, which was well accomplished.

I have never yet seen a thoroughly clean barn cellar under where a herd of cows are kept. Some are cleaner than others. Some, in my opinion, are exceedingly objectionable, as they are nothing less than a veritable cesspool, often poorly ventilated, their unwholesome odor permeating the whole building; and, if it be true that milk so readily and quickly absorbs whatever is in its surrounding atmosphere, then may it not be a possible

factor to the fact that 43 per cent. of the total deaths of our State, during the month of August, were children under five years of age, as reported by our State Board of Health, in its last bulletin. Barn cellars, where cows are kept, should either be abolished or made reasonable dry. The latter may be done by plenty of dry absorbents—dry earth being within the reach of all, answers an excellent purpose.

MARLBOROUGH—WILLIS W. HALL, ESQ., *Health Officer*.

There has been no case of a contagious disease reported.

The sanitary condition of school houses and of other public buildings is good.

The water supply is mostly from wells, and is as yet in a pretty good condition.

TOWN OF MERIDEN—DR. E. A. WILSON, *Health Officer*.

The only epidemic was scarlet fever, and the first case (cause unknown) was responsible: this case was of a mild type. No physician was called, and the boy was allowed to attend school and church. During a marriage service he fainted, and then a physician was called, who found him and his brother ill with scarlet fever. Both cases were reported at the same time, but the exposure had taken place and eight cases were directly traced. Five others were traced to insufficient quarantine in the city. Total thirty-three cases, one death.

My rule, which differs from that in vogue in the city of Meriden, is to quarantine all cases for about six weeks, and even longer if the process of desquamation is not completed. The period of quarantine should be altogether in the control of the health officer, as the attending physician generally finishes his treatment with the cessation of the acute symptoms, and is not aware of the later progress of the cases. I am radically opposed to discrimination in regard to the type of this disease, as a majority of the exposures are due to the benign cases. Every house should be fumigated with formaldehyde gas after the patient has fully recovered. Many people will burn one pound of sulphur and think they have fumigated from five thousand to twenty thousand cubic feet.

Diphtheria and membranous croup—Two cases, one death.

Typhoid fever—One case, one death.

Cerebro-spinal fever—One case, one death.

Pulmonary consumption—No efforts are made to restrict this disease.

Nuisances—Number of complaints fifteen; number abated fifteen.

It is evident that some new method for the disposal of garbage must be adopted. The custom of carting it outside the city limits and dumping on any lot that is available is prejudicial to the public health, and some new means must soon be advised to prevent this nuisance.

Public buildings—A new almshouse is in process of erection. When completed it will be a healthful and restful retreat for the unfortunate who have been deprived of health and home.

Ice ponds—The five ice ponds from which our supply is furnished are in excellent sanitary condition, and the owners are always alert.

Milk—I have no personal knowledge of the precautions taken by milkmen to protect the purity of the milk.

The purity of milk, assuming that it is good when drawn from the cow, requires an even temperature after cooling, and that not over 45 degrees Fahrenheit. When the temperature rises above that point germs hostile to good milk develop with great rapidity. The preservatives, or antifermentatives, such as borax, salicylic acid, formaldehyde, should never be used.

CITY OF MERIDEN—DR. A. W. TRACY, *Health Officer*.

The sanitary conditions of the city of Meriden, of its schools and public buildings are the same as reported one year ago.

We have experienced no epidemic, although scattered cases of diphtheria and scarlet fever continue to occur with no fatal results from the latter and very few from the former.

The complaints of nuisances are almost wholly confined to the odor from the vaults of outside privies.

No improvement on the methods of collection of garbage.

There have been three cases of typhoid fever, but I have been unable to trace the source of any of them.

Our ice and milk supply is still without any inspection.

Our sewer system is fast approaching completion and its good effect is shown especially by discontinuing the diphtheria bearing cesspool.

In houses connected with the public sewer no case of diphtheria has made its appearance during the past two years.

MIDDLEBURY—FRANK A. TYLER, ESQ., *Health Officer*.

There has been nine cases of measles reported.

The school houses and other public buildings are in good sanitary condition.

The ice supply is nearly all cut on ponds that are fed by springs of pure water.

MIDDLETOWN—DR. J. H. McDOUGALL, *Health Officer*.

In the town of Middletown there have been reported nine cases of diphtheria, only one proved fatal, so far as I have been able to learn. Antitoxine was used in eight of these cases, one of which, an infant, succumbed. The case in which antitoxine was not used recovered, as did seven of those to whom it was administered.

After fumigation with formaldehyde gas, no secondary case occurred.

Two cases of scarlet fever, one was secondary, occurred at South Farms, both recovered.

Another case was reported at The Connecticut Industrial School for Girls, which also recovered; it was due to the very stringent preventive measures used by the attending physician, and to subsequent thorough fumigation that an epidemic was prevented at that institution.

Measles and whooping cough have been epidemic, but few of the cases have been reported, owing to the prevalent opinion that every child must have these distempers.

La Grippe, with many cases of pneumonia as a complication, made the past winter and spring more memorable for widespread sickness and fatality, than any since 1891-92.

Very few typhoid fever cases were reported.

The Durant School I found to be in an unsanitary condition, which has since been corrected.

Suffice it to say that a dead cat was found in a part of the furnace, which accounted (in a measure) for the foul odor detected in the schoolroom last term.

On complaint, I visited the premises of Mr. Alfred Curtis, on the Middlesex Pike, and found upon the surface of his land

the skeletons of ten dead horses, with their decomposing offal polluting the air. I ordered them buried.

Numerous complaints of sink drain nuisances have been investigated and have proved difficult to overcome, because of the indifference of the people from whose premises the same flow.

In the city of Middletown, since my appointment, March 6, 1900, there have been ten cases of diphtheria, two of which proved fatal, and one other after recovery succumbed to intestinal obstruction and cardiac asthenia, the latter condition having existed previous to the attack of diphtheria.

Two mild cases of scarlet fever occurred. It is of some interest to state the novel experience of one of these cases, as he and his twin brother, aged three years, were convalescing from chicken pox, he was attacked with mumps, simultaneous with which the eruption of scarlet fever appeared and ran the usual course with desquamation. The twin escaped scarlet fever, came down with mumps, which fact verified the diagnosis in his brothers case. To cap the climax, both of these little fellows during their recovery from the previous series of diseases, took whooping cough from an elder brother, and although one of them had many attacks of convulsions, both survived, one having passed through three and the other four infectious diseases consecutively.

Only two typhoid fever cases were reported to me up to September 1st.

I have secured the consent of the town clerk to report to me all deaths from tuberculosis, and it is my purpose to fumigate with formaldehyde gas the room last occupied by the victims of this dread disease.

Garbage and ashes are still deposited in the same receptacle and the city dump is still perilously near human habitation. Sewers are much needed in several of the outlying streets.

On inspection a portion of the watershed of the Higby Mountain reservoir was condemned, as a large quantity of manure had been ploughed into the soil, and it was feared the same would contaminate the water.

MILFORD—DR. E. B. HEADY, *Health Officer*.

Measles, twelve cases; scarlet fever, three; diphtheria, one; a few cases of whooping cough, and typhoid fever three cases.

Nuisances, number of complaints, twenty-two; all abated.

Garbage disposal is same as in the past, each family dispose of their garbage by cremation or have it carried away.

Sewage is principally disposed of by cesspools and if near a well the water is contaminated. There is nothing so dangerous as cesspools, and in constructing a cesspool people pay very little attention to its proximity to the well. They seem to think if they can get the sink water under the ground they have done wisely.

I have found in almost all cases where families have continued ill health and fevers that there is something wrong with the cesspool and well.

I found the school house at Woodmont needed a good cleaning, the outbuilding needed a good cleaning and scrubbing, and good strong locks put on to keep it from use while school is closed. The school house at Wheeler's Farms is perfect. The outbuilding needed cleaning and strong locks put on. The West District school house needed a good cleaning, also the outbuilding and good locks put on.

I find the public school in good condition, neat and clean. I had some portions of the basement fumigated.

The sanitary condition of other public buildings is good, with exception of the Town Hall, and dressing rooms all need cleaning and painting.

The water supply is from wells and the public water. The public water is the best in the State. It is far ahead of any well water, when the water in the well is low it should be boiled before drinking. The public water is safe to use without boiling.

The ice ponds have all been examined and none condemned, except those in the center of the town.

I have no personal knowledge that the dairymen take any precautions to protect the purity of the milk beyond the customary practice of the past.

A large number of citizens presented a complaint against the unloading of cars of fertilizer near the Milford station. After a consultation with the County Health Officer and the superintendent of the road, it was arranged that the cars should be placed as far as possible west on the north switch track, and the cars should be unloaded within twenty-four hours from the

time unloading commenced; such a health rule was put in force with the belief it will abate the nuisance.

MONTVILLE—DR. MORTON E. FOX, *Health Officer*.

The state of the public health is very satisfactory, especially so during the winter months.

Measles—There was some fourteen cases, which were imported from the surrounding towns, where they were very prevalent.

The houses were placarded and no spread outside of the families having them.

Scarlet fever—There was a very few cases of mild type; source of contagion doubtful.

Diphtheria—One severe case which resulted fatally. The source of contagion was from Waterford. The family quarantined and thorough disinfection of the house; no spread of the disease.

Whooping cough—Two cases reported.

Nuisances—Number of complaints four; all abated promptly upon notice. One abated without complaint.

Sanitary condition of school buildings and other public buildings are good.

MONROE—DR. FRANK J. WALES, *Health Officer*.

Our town has been quite free from infectious diseases, there having been reported but seven cases of measles (four of which were in one family) of a mild type, and whose origin was not traced. There was one mild case of scarlet fever reported, from which there was no spread. No other infectious diseases were reported.

I believe we are particularly free from cases of pulmonary consumption.

There has been one nuisance reported, and one abated without complaint.

The sanitary condition of the school houses and other public buildings is very good.

The water supply is good, coming from wells and springs, as a rule of good location.

No ice ponds have been examined or condemned.

MORRIS—H. C. ALVORD, Esq., *Health Officer*.

My appointment as town health officer bears date June 1st. During the past year three cases of measles were reported; also one of typhoid fever.

No complaint of nuisances has been reported.

Sanitary condition of school houses and outbuildings I found in fair condition, excepting the Second District, where I found the outbuilding needed immediate attention, which was attended to at my request.

Have visited six ice ponds where ice is cut for dairy and family use. I found nothing which, in my estimation, would contaminate them.

Most of them are fed by nearby springs of pure water.

Regarding milk, the ordinary care and precautions in the care and cooling of milk is observed.

My bill to the town is fifty cents for reporting to State Health Officer.

NAUGATUCK—WILLIAM R. SMITH, Esq., *Health Officer*.

During the past year there has been thirty-four cases of measles reported; it was prevalent during the year, but most in the month of June.

Scarlet fever has also been prevalent, but it has been distributed throughout the year; a few cases reported each month; twenty-one all told. There has been very little diphtheria in the borough the past year; only eight cases having been reported; this is a very gratifying result, owing no doubt to better sanitary conditions.

Whooping cough existed to a considerable extent during the winter and early spring.

The number of cases of typhoid fever reported were about the same as other years, seventeen cases reported; this was owing in part to the insufficient rainfall, thereby causing the springs and wells to become very low. One case of cerebrospinal fever reported.

Consumption has prevailed to some extent.

During the summer months there was an excessive death-rate, caused by deaths under five years.

There has been six complaints of nuisances that were abated, also five cases that were abated without complaint.

Our garbage is collected by contract, the service during the past year has been excellent.

We are making progress in the sewer business quite fast, there has been two sewers completed by the town during the past year, and the borough has voted to lay another known as the Rubber Ave. sewer.

The school houses are all in excellent sanitary condition, also the public building.

The water supply has been ample and generally good; there is one exception, however, the Pond Mill reservoir, this supply is not what it should be.

There has been ten ice ponds examined.

There were some conditions that were ordered abated in the way of sink drains and surface closets; at present they are all in proper condition.

In regard to the milk supply it is as a rule excellent, every dairyman's place that furnishes milk in this borough has been inspected; every one has good ventilation and clean stalls; all of them cool their milk at once; nearly all of them have milk houses.

CITY OF NEW BRITAIN—DR. ROBERT M. CLARK, *Health Officer*.

The general sanitary condition of the city has been improved during the past year, by the opening of the new sewers in the southwestern part of the city, and the large number of houses which have been connected with these and other sewer systems.

There have been nearly 400 closets connected with the sewers this past year.

There have been more cases of scarlet fever this year than last, hardly reaching a sufficient number at one time to be called an epidemic. The total number reported was eighty-two. Diphtheria remained about the same, with an increase of two cases over last year, or thirty-three cases. These cases were visited and quarantined by your committee. Typhoid fever cases have been very rare, but influenza or grip has claimed many victims, especially during the spring.

Over one hundred complaints of nuisances in various forms have been received and investigated by the chairman and sanitary inspector. These have been as well remedied as possible, under the existing circumstances. In some cases it was found

impracticable to do away with one nuisance without causing a greater one.

The collection of garbage has been fairly satisfactory, but few complaints being received after the collectors became accustomed to their routes.

TOWN OF NEW BRITAIN—DR. W. P. BUNNELL, *Health Officer*.

One case measles, seven cases of scarlet fever and two of diphtheria were reported to the town health officer.

There were four complaints of nuisances, and all were abated.

Garbage is satisfactorily collected and buried and there has been no complaint of it.

Sewage is carried by means of small streams to the Connecticut River with very unsatisfactory results and the city is now trying filter beds in Beckley, with the hope of making some satisfactory disposition of its sewage.

The sanitary condition of the school houses and public buildings is good.

The water supply is pure and abundant.

Three ice ponds were inspected and found in good condition.

A number of new sewers have been built during the year.

TOWN AND BOROUGH OF NEW CANAAN—DR. CHARLES B. KEELER, *Health Officer*.

The epidemic of measles which swept over Connecticut came to New Canaan direct from one of the adjoining towns, and before the case was confined to the house, all the pupils in one school were exposed, and all but three had the disease. The school was closed and the building thoroughly fumigated. From these cases and one coming from Southport can be traced all the measles we had in New Canaan this year.

There has been no other infectious disease this year, excepting five cases of typhoid fever and one case of scarlet fever. These cases, with but one exception, could be traced to other cases in New York and Connecticut towns.

Nuisances—Complaints have been received of thirteen and all have been abated. I feel gratified in the way I have been supported by the physicians and the public in having these nuisances abated. One smoke and gas nuisance was abated by the cour-

tesy of Messrs. Fancher & Co. Simply calling their attention to the matter it was remedied without orders or expense to the borough.

The disposition of garbage is the same as has been reported previous years. It is removed from the business portions of the borough to farms, where it is used for fertilizing the land.

Sanitary condition of the public schools is fair. The Center School was overcrowded last year. The ventilation of some of the public buildings is very bad and should be improved.

The water supply is from wells and springs and the New Canaan reservoir.

The ice ponds have all been examined and found to be in excellent condition.

The milk supply is very good, but a few cases of summer diarrhoea could be traced to the milk used from some herds.

NEW FAIRFIELD—DR. W. L. WATSON, *Health Officer*.

The only cases of contagious diseases of which I can obtain any knowledge are a dozen cases or more of measles, most of which were not attended by any physician. Our school was closed by order of committee. There has been no other contagious disease, except a mild case of diphtheria, brought from a family in Brookfield, where there had been one case six weeks before. No extension from this case.

A farming district, no thickly settled sections.

NEW HARTFORD—DR. J. SWEET, *Health Officer*.

The general sanitary condition of the town has been good, with the one exception of a serious epidemic of the measles.

During the year eighty-three cases of measles have been reported. The outbreak started in March and reached its height in April, when sixty-nine cases were reported. It was a very severe type of the disease and remarkable in that so many people in adult life were afflicted.

There have been eleven mild cases of scarlet fever. Each house into which scarlet fever entered was quarantined, and, after the recovery of the patient, was disinfected by myself. There has not been a case of scarlet fever reported in over four months.

One case of whooping cough has been reported and three cases of typhoid fever.

Of all the other contagious diseases New Hartford has been peculiarly free.

Three complaints of nuisances were promptly abated.

There should be some method for the disposal of garbage other than throwing it into back yards to decompose and become offensive and dangerous to the public health, as is the case in several instances that have come to my notice. Again, the present sewerage system is inadequate for the needs of this village. There should be some other provision whereby people could not turn sewage into the highway. A more efficient sewerage system might be the means of doing away with the numerous surface closets, which may not be dangerous to the public health, but the aroma from which is exceedingly unpleasant as it comes wafted to you on the gentle breezes of a summer evening.

The school houses and other public buildings are in good sanitary condition.

The water supply is, for the most part, excellent. The village is provided with two reservoirs, which are supplied from mountain brooks.

I have not examined any ice ponds.

I have no personal knowledge, but so far I know the milk supply is in good condition.

NEW HAVEN—DR. FRANK W. WRIGHT, *Health Officer*.

The health of New Haven has been exceptionally good during the past year. There have been but comparatively few contagious diseases and as a rule these have been of a mild character.

In the month of November, 1899, there was an outbreak of diphtheria in the Roger Sherman School in the western part of the city. This was easily suppressed by closing the school for two weeks, and thoroughly disinfecting the school building. Two mild cases of varioloid occurred among the students of Yale University in March, 1900.

The number of cases of contagious diseases reported and the mortality from them can be seen in the following table:

DIPHTHERIA.

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
Cases	6	16	45	19	22	17	10	8	1	11	4	5	164
Deaths	--	2	6	2	6	2	3	2	--	1	--	2	26

SCARLET FEVER.

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
Cases	7	8	36	21	13	21	51	17	15	6	9	4	208
Deaths	--	--	--	--	1	--	1	2	--	1	--	1	6

TYPHOID FEVER.

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
Cases	30	19	11	16	8	6	2	4	3	2	2	12	115
Deaths	6	7	3	4	3	1	2	--	1	1	1	4	33

The total number of deaths in this city since my last report is nineteen hundred and seventy-six, making a death-rate per one thousand of 18.29.

Zymotic diseases have certainly been less fatal, if not less common during the past year. There were from this class of diseases three hundred and sixteen deaths, giving a death-rate of 2.92 per one thousand.

Our laboratory I consider a great adjunct to the health department and a benefit to the physicians that is yearly being more appreciated. While, during the past year less examinations were made than in some former years, one can convince himself that the reason for this is that there were less suspicious cases by referring to the table showing the number of contagious diseases reported. During the month of November, the only month of the year in which diphtheria was at all prevalent, many examinations were made. This can be seen by reference to the tables giving the work of the year by months.

Free examinations are made by the bacteriologist, Dr. Archibald McNeil, of culture in cases of suspected diphtheria, of sputum for the tubercle bacilli and Widal's test for reaction in cases of suspected typhoid fever.

He also examines such samples of milk as are collected by the sanitary inspectors and those brought in by dealers and consumers. As yet, no appropriation for a milk and food inspector has been granted, notwithstanding it has been asked for by the Board of Health for several years. To one who knows the quality of the milk and much of the meat and vegetables sold in this city, the importance of such an inspector is plain. Quite a quantity of "bob veal" has been seized by this and the police departments from time to time, and those offering it for sale have been successfully prosecuted. There have been examined in our laboratory since my last report, eighty-five samples of milk, twenty-nine of which did not comply with the requirements of the city ordinances.

The following table shows the bacteriological examinations made and the results obtained, monthly, for the past year.

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
Examinations for diphtheria..	3	9	34	3	12	7	12	4	3	5	1	3	96
Cases of true diphtheria	1	6	13	1	8	4	9	1	1	23	3	3	48
Examinations for tuberculosis	8	12	4	21	14	20	26	6	9	23	3	8	154
Tubercle Bacilli found.....	4	5	2	9	3	8	6	3	3	8	3	3	54
Examinations by Widal's test	5	6	4	2	3	1	1	1	--	--	--	1	24
Reaction obtained.....	--	3	3	2	1	--	--	--	--	--	--	--	9

Our sanitary inspectors have not been able for several years to make house-to-house inspections in a systematic manner on account of the great diversity of work thrown upon them by recent regulations. They act as garbage inspectors, milk and food inspectors, sanitary inspectors, placard houses, disinfect after contagious diseases, etc. These all require much time and a large degree of intelligence.

The following table gives a summary of their work for the year.

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
No. inspections made...	436	440	400	939	474	234	300	363	356	424	534	445	5345
No. nuisances found ...	81	79	56	54	63	29	31	32	31	36	56	52	590
No. nuisances abated ...	54	59	58	41	43	26	22	28	27	28	63	55	504
Privy-vaults abolished .	54	37	24	32	21	6	2	2	9	11	12	18	328
Houses disinfected.....	10	9	11	32	31	26	22	35	42	46	23	1	288

For several years we have depended almost entirely upon formaldehyde as a disinfecting agent and as a rule the results have been satisfactory. We have tried many devices for the use of this material and now use several kinds, choosing for each place to be disinfected as the conditions seem to require. Whenever we can give a room sufficiently long exposure we always depend upon formalin distributed about the room and on suspended sheets, by means of atomizers or small sprays in preference to any regenerator.

The plumbing inspector's work is appreciated by all the first-class plumbers and those having work done. One familiar with the condition of plumbing ten years ago and that of to-day in this city, knows that there has been a vast improvement during the decade.

His work for the year is shown by the table below :

	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Total.
No. inspections of plumbing..	117	94	138	112	50	85	113	79	101	130	123	114	1142
No. inspections in old houses..	45	37	63	58	41	23	22	30	43	55	51	46	468
No. inspections in new houses	12	10	9	11	9	13	22	8	12	8	13	12	127
No. inspections on complaint..	2	2	2	2	4	4	5	3	5	2	4	35	
No. inspections by order of B. of H.	9	3	3	4	2	12	2	12	12	12	12	71	

The system of collecting garbage has not yet been improved upon, and I can see no prospect of an early change for the better. The Board of Health yearly asks for an appropriation for purchasing and controlling a municipal plant, but fails yearly. This must come with an incineration plant before many years.

The school houses of this city are in good condition. The Superintendent of Schools, the principals and teachers are using their best endeavors to cooperate with the Board of Health in the attempt to keep contagious diseases from the schools, and I believe with good results. A systematic medical inspection of schools would be of great assistance towards this good work, but as yet the Board of Health have not been able to convince the Board of Finance of its importance. I feel after many years experience that we are accomplishing much towards improving the healthfulness of New Haven, and that much more could be done if we were provided with more money.

NEW LONDON—PERCY COE EGGLESTON, ESQ., *Chairman of Health Committee.*

The instances of contagious diseases terminating fatally have been very few, numbering only eight, while all the cases reported have numbered two hundred and twenty-eight, and have been distributed as follows: Measles, one hundred and thirty-five; scarlet fever, seventeen; diphtheria and membranous croup, sixty-eight; typhoid fever, four; chicken-pox, three; mumps, one.

One patient, sick with typhoid fever, was brought here from Northampton, Mass.; one case of mumps to us from New York; and one family afflicted with diphtheria reached this city from Fisher's Island. The other cases appear to have had their origin in the city. The fact, that, so far as our knowledge goes, there are no traceable instances where primary cases have been transmitted to secondary ones outside the same family, shows that the quarantine which we have placed on such diseases has been effective and accomplished its purpose.

A city ordinance is in force prohibitory to spitting in the trolley cars, but no other steps have been taken tending towards the restriction of pulmonary consumption. We are not informed of any cases of tuberculosis arising from tuberculous milk, nor has any excessive death-rate occurred to make an investigation necessary.

A good many complaints have been made of such nuisances as vaults, cesspools, pig pens, stables, henneries, dumping grounds, etc. In these cases the cause of complaint has either been entirely removed or the nuisance abated.

The dry garbage of the city, such as ashes and street scrapings, has been sold during the year to private parties for land filling purposes; the swill and vegetable matter have been removed to an outlying farm.

In regard to our sewers, a great change of sentiment has come about since the inception of the system in 1886. Connections were at first few, and the extension of the system was regarded with indifference and even antagonism. At the present time the demands come more rapidly than they can be met. To-day there are twelve hundred (1200) connections, and over sixteen miles of sewers having their outlet in the Thames River.

It is of special interest to note, as indicative of what has recently been accomplished, that the extensions of the past years have increased the total length of sewers in use over 27 per cent.

The city provides a detention hospital on the town farm, for the isolation of contagious diseases when necessary. In two instances this hospital has been used during the past year, and nurses provided for the patients. The city has provided during the same period medical attendance, disinfectants, medicine and food for quarantined families, to the amount of three hundred and thirty-eight dollars and ninety-six cents (\$338.96).

The school houses and other public buildings are now in good sanitary condition. In November, 1899, we found an unsanitary condition prevailing at one of our school houses by reason of the lack of a sewer outlet. A question as to whether the expense of an outlet should be borne by the Board of School Visitors or the Board of Sewer Commissioners caused both boards to delay while the danger still continued. In this emergency the Health Committee insisted on prompt measures and secured a special appropriation from the Common Council to meet the expense of entering a private sewer.

Our water supply has been reduced by the continued drought to a point never reached at this time of the year but twice before in the history of the water works. Its quality still continues exceptionally good.

There has seemed to be no occasion for making an examination of the ice ponds.

The Committee has made no investigation as to the methods which prevail among the dairymen bringing milk to this city. We are not informed of any cases of illness which have resulted in consequence of any lack of precaution on the part of the dairymen.

In conclusion, we report with pleasure that an improved health system is to be at once inaugurated into this city. It has been customary up to the present time for a member of the police force to be placed each year at the service of the Health and Nuisance Committee. He has worked under the direction of the committee, and, when a case of contagious disease has been reported, has visited the family afflicted, quarantined it, provided disinfectants and, on the termination of the disease, thoroughly disinfected the premises.

The defect of the system has consisted in the fact that neither the committee nor its inspector have been trained in medical and sanitary science, but have been entirely without advisory resources on these subjects. It has been the good fortune of the present committee to have secured the adoption by the Common Council of an ordinance providing for a medical health officer and instituting a health system such as shall meet the requirements of State laws and the growing needs of an increased population.

NEW MILFORD—DR. JAMES C. BARKER, *Health Officer*.

With the exception of an epidemic of whooping cough, which occurred during the early spring, New Milford has been free from any unusual amount of sickness.

During the month of August there were quite a number of cases of bowel troubles, due to the reservoir water; upon investigation, one of the reservoirs was found to be in a condition needing attention, which the water company gave it upon notification, and the water is now clear and good.

There has been a distinct falling off of nuisance complaints, which shows that the town is in a better sanitary condition.

There have been reported, diphtheria six, measles eight, scarlet fever nine and typhoid fever four cases.

Sanitary condition of the school houses is good, likewise the public buildings.

Water supply good.

We have one ice pond and it is in good condition.

The milkmen in this section are very careful with their cans, stables and use every precaution to guard against any disease, and to keep their cows clean and free from disease.

NEWINGTON—JOHN S. KIRKHAM, ESQ., *Health Officer*.

At a meeting of some of the town health officers in the month of June, a rule was adopted and published in due form, that no kitchen garbage however obtained, should be carted from the city of Hartford into the towns adjoining said city, no violations of the rule were observed in this town, but in several others, prosecutions were necessary to prevent its violation.

There have occurred three cases of diphtheria; all children of one family; all recovered; they were isolated, and no cases occurred by contagion.

There have been sporadic cases of whooping cough in most months of the year, and but one distinctive case of typhoid fever, which recovered, and they are decreasing, resulting from better sanitary conditions in the homes in part.

One verbal complaint of a nuisance was received and abated.

Vaults and cesspools receive the sewage as a rule.

School houses and other public buildings have been put in good sanitary condition.

As the result of two dry seasons the wells and springs are very low, affecting unfavorably the general health.

In all cases I believe the ice supply is cut from ponds fed directly by spring water.

Many of the milk producers have improved over the practice of the past, by "cleaning up," thus reducing the chances of impure milk, but more in this direction remains to be done.

NEWTOWN—DR. EDWARD M. SMITH, *Health Officer*.

An epidemic of whooping cough began in the early spring and continued well into the summer—this was quite general in all sections of the town and the vast majority of children who were not immune by a previous attack suffered from it, and not a few adults also, but notwithstanding that the generality of cases was severe not a death was reported as being due to the disease. The first cases were brought into town by children who had been exposed while away from home, and these carried it to school and communicated it pretty generally before it was recognized.

Measles prevailed generally. There were so many foci of contagion that the origin of individual cases could seldom be positively traced. Only one death from measles was returned and that due to a complicating capillary bronchitis in a person past fifty years of age. Nearly all the cases of measles were moderate in severity, or mild, with the exception of a few very severe cases.

Of measles twenty-six cases were reported and quite an additional number occurred with no medical attendant, and consequently no report.

Of scarlet fever there was one doubtful case reported, and one sure case; in this latter case a very careful inquiry was instituted as to origin, but with no satisfactory result; the

origin could not be determined. Careful quarantine and disinfection with thorough after fumigation prevented any secondary cases.

Of diphtheria one rather severe case was reported; with strict quarantine and other thorough measures it was confined to the original case. The origin here could not be determined with accuracy, as the person had been in a number of places away from home within the time necessary to acquire the disease.

Typhoid fever, two cases in one family at same time; both severe; microscopical examination proved diagnosis; both recovered. The well water was suspected and an analysis obtained from the Chemist of the State Board of Health, which showed the water to be unfit for drinking, and the well was condemned by the town health officer. Thorough care was taken of the dejecta and no further cases occurred. One case was reported as suspected typhoid fever, but time proved it to be remittent fever.

Three or four nuisances have been abated upon complaint, and two without complaint.

School houses have been found, upon inspection, to be in a fairly good sanitary condition; some improvements having been made. The few public buildings are in a fairly good sanitary condition.

The source of water supply is the same as for many years past, and the present extremely dry season has lowered the water supply markedly, and impaired its quality to a considerable extent, and in some instances mild diseases have been caused thereby, but nothing serious as yet.

The ice ponds from which ice exposed for sale is cut were inspected by the town health officer, and found in good condition. A large number of farmers have private ice ponds from which ice is cut for cooling purposes, these have not been inspected, as the ice therefrom is not offered for sale.

NORFOLK—DR. J. C. KENDALL, *Health Officer*.

While it is probable that there has been a full average of sickness during the past year, the sickness from contagious diseases has been quite light. Measles invaded our town five times, all in 1900. In every instance the origin was searched

for, in but one instance was it found. The usual history of these invasions was that the first case would be taken sick away from home and would come home because he was unable to work, or would fall sick at home after a visit away from town. After the sickness was known to be measles the party could not remember meeting anybody that he knew had the measles or could then suspect of suffering from the disease. Four times did our people suffer thus and bring measles to our Norfolk homes. What is the lesson that such a record teaches? It is that people suffering from measles should be kept from mingling with their fellows, and also, more important I claim, that people who have been exposed to measles and have not already had them should after one week be rigidly kept away from the public until the time for the disease to appear in them has passed. The reasons are: measles is the most actively contagious disease of the whole list; they may be communicated from the very first manifestation in any person; this manifestation is very liable to be misunderstood and for a few days the victim is going about contaminating his friends; therefore he should keep aloof until the result of the exposure he met is surely decided in the negative. If this rule had been observed where our four Norfolk friends visited these four invasions of our town would have been prevented. (The same principles of restraint apply to all sorts of contagious cases.)*

The other invasion illustrates another habit of people in regard to their conduct when they have contagious disease in their person or their homes, viz.: they are unwilling to keep away from people and to keep people away from their houses. They are reckless and indifferent to consequences.

During June measles was in eighty of the hundred and sixty-eight towns of our State. The cases were not all counted, there were so many. There were sixteen deaths by measles that month; sixteen deaths that might have been prevented by such measures as I have outlined. In one month sixteen mothers mourning for their babies and young children that might have

* When I was reading the proofsheets of this report we were just started in an epidemic of mumps, in which people were having no doctor and no health officer; as soon as their jaws are movable they go about the world exposing their mates. I hear of them one after another by chance after this has been going on for days. What the end will be no one can tell.

been spared to them if somebody had only been willing to restrain himself from his usual freedom for a few days.

Let me give the history of another invasion which enlarges the scope of the results of such sickness in a community. A man visited his brother in Waterbury. After a few days he developed measles, but before that he had exposed three persons in a family where he lived and three others in his father's house; later he gave the disease to another man. These men were laid up for eight to ten days; two children were kept from school for two weeks, one of our schools was closed for two weeks lest the teacher might infect her scholars, and a fifth person exposed underwent a course of the disease. Two exposed persons escaped. This is no assurance that they will always escape, as persons who have escaped repeatedly are often finally overcome. This was the case with some of the persons mentioned in these histories.

There have been twenty cases of measles this year; the type of the disease has been light, as it has been throughout the State.

There have been two visitations of whooping cough; six cases altogether. There was no extension to this disease beyond the families in which the first cases appeared. A visitor brought it to one house.

There were two cases of typhoid fever reported without any connection. The origin of these cases remains unknown. There was one death by typhoid fever.

There were thus twenty-eight cases of communicable disease with one death.

Cases of tuberculosis are not reported. I have not heard of any new cases during the year.

The deaths were 16.62 per cent. greater than the average. This unusual mortality was not at all dependent upon causes that could be opposed by sanitary administration.

The work of the health office as to nuisances has been very light, too light to review. This is a very happy and desirable experience. I have been health officer continuously since the initiation of our present State law, October, 1893. On August 27 I recorded my 304th service that was attended by an order, to

say nothing of unnumbered inspections, counsels, etc., that required no order.

The sanitary condition of school houses and other public buildings is good.

Saying that we cannot show any improvement in condition as to garbage, sewage and water supply, does not at all compromise our good condition in these respects. Our sewer and water systems are of the best. Since my last report the south arm of our sewer system has been completed. The principle of our disposal field is what is known as intermittent filtration; i. e. sewage runs for a period into one bed, is then filtered while another bed receives the stream of sewage. After the water subsides from a bed, the bed is cleared of the deposit, and the surface of the sand is loosened up to the influence of air, light and the heat of the sun, which fits it for another accession of sewage. There are three beds prepared for this service, and plans are drawn for two more whenever it shall be seen that they are requisite.

The last legislature passed an act for preventing the sale and use of unwholesome ice. Our people probably never reflect on the high grade of our ice, so different from that of valley towns. Our ice does not come from stored up-country water, but from the original sources of rivers, the Housatonic, the Naugatuck and the Farmington. When you see the pools along our railroads from which ice is taken for many towns, you cannot but pity the consumers of the ice. Ice from a body of water is no more fit for drinking water than the water of the pool was fit for drinking. I have not been obliged to utter any precaution as to cutting ice where our people habitually in these years do it.

As usual, this report is following an outline given by the State Board of Health. One topic suggested is the following:

Milk—Do any of the dairymen in your town take any precautions, beyond the customary practice of the past, to protect the purity of milk?

If so, please state in what particulars.

- (a) As to methods of milking.
- (b) As to immediate cooling and care of milk.
- (c) As to ventilation and cleanliness of stable and health of cows.

(d) As to cleanliness of utensils used.

If you have no personal knowledge of the above particulars, will you please so state. The importance of pure milk justifies these inquiries.

I have no personal knowledge or reason to believe that any change has been made by any producer since I have been health officer and have been talking about improved milk. I know that I see the old customs followed. The specifications a, b, c, d show in what particulars care should be taken. There ought to be one more specification, (e) as to the location and connections of the milk house. The milk house should be far removed from the barnyard and stables, and not connected by any sort of building. A milk house in the barn or in an addition to the barn is intolerable. Cooling the milk in the barnyard is unparadonable. Having these milk things all day in an atmosphere that comes from the barn or barnyard is outrageous. The milk house too ought not to be some old cubby-hole of the dwelling house. It ought to be a building by itself, even if it is no larger than a smoke house; it should stand remote from all buildings and every source of contamination. It should be kept as clean as a milk can.

Because I believe that all I say about milk is unheeded I had decided not to present any views on the subject of my own, but to make two extracts. The first is from the Bulletin of the State Board of Health for July 1.

"Although the mortality was larger than usual in July it was exceeded in March and April of the present year. In the latter months the excess was chiefly due to inflammations affecting the air passages, and very largely among those in advanced years. But in July the highest mortality was due to inflammations of the bowels, attended with diarrhoea, and the chief sufferers were infants.

"It is true there is some proportional relation between excessive high temperature and infantile mortality from diarrhoea, but the parallel between high temperature and high mortality of infants, among different surroundings and conditions, in the same community, is too often wanting to prove that heat alone unaided by other influences can as a sole and direct cause produce infantile diarrhoea. Heat probably acts indirectly, chiefly in two ways; first, by its debilitating influence, impairing

the delicate digestive powers of the infant, secondly, and chiefly by the injurious effect which is produced by hot weather upon the food given to infants.

"The great majority of deaths from diarrhoea occurs in the first years of life. A much larger majority occurs among bottle-fed babies. Cows' milk is the usual bottle supply. It is generally fed to the children from twelve to forty-eight hours after it is taken from the cow. In that interval it is greatly contaminated by the exposures to which it has been subjected, and the consequent growth within it is innumerable bacteria.

"Consider now the wide difference in the quality of the nourishment of a nursing baby and that of a bottle-fed baby. The former receives its nutriment direct from its mother's breast without the least exposure, even to the air. It is therefore sterile—free from bacteria. But the cows' milk in the bottle has had many and various exposures, and it is a fertile field for the growth of bacteria. On the least exposure it receives many germs from its surroundings, which in a few hours multiply by thousands, far more rapidly in hot weather, and quickly change and injure the quality of the milk as food, particularly for infants.

"Until the baby has passed the nursing age its stomach is not prepared by nature for any other food than that from the natural fount. Any artificial food therefore is a trial for its digestive powers to which they are frequently unequal.

"It is exceedingly rare that a baby, fed exclusively from the breast of its mother, suffers with diarrhoea, however hot the weather may be. Hence it follows that most of the four hundred babies that died in Connecticut in July were victims of poisoned milk or other unsuitable food."

The second extract is from a paper by Dr. Lindsley that has just been made public.

"It is a fact that more than twenty-four per cent., almost one-quarter, of all the deaths that have occurred in Connecticut in the last ten years were attributed to diseases that are readily, easily and frequently transmitted by milk taken as food. There is nothing else in the dietary list of which this can be said.

"Milk has great absorbent powers. If the atmosphere about the cow at the time of milking is heavily charged with dust and offensive effluvia, if the milker has dirty hands and dirty

clothes, and if the cow's teats are besmeared with dirt, the milk receives a portion of these elements, and no amount of straining through a cloth will eliminate them.

"Milk is a most fertile culture fluid." (Any thing that germs will propagate on or in is called a culture medium, because workers in laboratories, where these subjects are studied, cultivate the germs as carefully and studiously as a farmer does his crops) "and the implantation of germs from these various sources in milk will yield crops more abundant than can be produced in any other article of food.

"What do bacteriologists tell us on this point? They say that while milk in the udder of the cow is free from bacteria, yet the utmost care possible will not prevent their presence in some degree immediately on exposure to the air. Some years ago Prof. Sedgwick of the School of Technology at Boston made some very careful experiments on this question.

"In twenty samples of milk carefully drawn in bottles especially prepared, there appeared at once the average presence of lactic acid bacteria in amount represented by the figures 1.66; that is, it would neutralize the amount of alkali indicated by that number. By the same notation a sour milk would be indicated by the figures 7.9. Hence the freshest milk is slightly sour, though not appreciably sour to the taste. The sourness is caused by the action of this acid forming bacteria. The same fresh milk may contain also other bacteria to the extent of dozens or hundreds to the c. c." (c. c. means cubic centimeter, about fifteen drops.)

"In commercial milk sourness is the test of its marketable value. It is the chief aim of the dealer to get his milk to the consumer before it gets sour. In cities the distance from the place of production is an important factor in the business. It cannot be delivered on the same day it is taken from the cow. Every hour, particularly in hot weather, endangers the change. People will not buy sour milk. They will buy any milk, however dirty, so long as it is not sour. That is the popular test of good milk. Milk can be kept a long time from souring by means of ice. Souring of milk is caused by acid forming germs. Ice stops the growth of these germs, but not of other germs. This milk may not be sour chemically, though sanitarily it had become very aged and unwholesome. The ice had not stopped

the growth of other germs. The notable fact developed here is that milk transported long distances under refrigerating appliances does not become appreciably sour and is still marketable, although changed otherwise to an unwholesome degree. These observations were made upon the milk as sold from wagons on the streets. In one sample the acidity had increased in twelve hours from 1.6 to only 1.8, yet the other bacteria had increased from 11,000 per c. c. to 8,000,000,000, and though not yet sour, it was simply rotten and unfit for use."

The paper goes on to speak of disease germs, which may get into milk and cause sickness in the consumers of the milk. There are four principal diseases which are conveyed in this way: typhoid fever, scarlet fever, diphtheria and tuberculosis. There have been four disastrous epidemics of typhoid fever in Connecticut within a few years that were traced to milk. Cows are not susceptible to typhoid fever, but they may suffer from scarlet fever, diphtheria and tuberculosis, and may yield directly to their milk the germs which will infect the users of the milk. Typhoid fever germs get into milk by being in water or on cloths, etc., with which the milk utensils are washed.

The gist of all this is that milk is a very delicate compound, the most perishable product of the market; that it is contaminated at every turn by exposure to the air, by contact with utensils and by motes of any sort that may drop into it; that it is peculiarly adapted to the propagation of all sorts of germs which multiply very rapidly every hour and become more and more destructive to the milk and more virulent as to their products. Hence the pertinence of control by the State over the conditions under which milk is produced and stored and marketed. In view of these conditions it would seem that the safest way would be to bottle milk in the clean and orderly milk house, and to leave it in the sealed bottle until it is used. There have been grave objections offered to bottled milk because producers do not use clean bottles. Then they must. They must have appliances suitable and sufficient and help enough and must take pains enough to put milk before the consumer that is wholesome.

The number of bacteria in milk varies very much from day to day. Here are figures given by a laboratory near Philadelphia that prepares milk for children.

August 26, number of bacteria per c. c.,	1,275
" 27, " "	2,950
" 28, " "	159
" 29, " "	9,600
" 30, " "	13,200
" 31, " "	11,525

These numbers are not incompatible with health. All the world knows that scalding milk renders it less apt to sicken babies; that is simply because it kills the bacteria. The simple bacteria of the air are devitalized at a temperature of 155 degrees and the disease producing germs are devitalized at the boiling point or somewhat lower, different kinds require different degrees.

I cannot leave the subject of State control of the milk supply without reiterating a few lines of my report of last year: "It is for the sake of innocent, helpless children and unsuspecting guardians that sanitarians are demanding the control of the milk supply. In Philadelphia, in July, 1897, there were 1,485 deaths of children under five years old. In July, 1898, notwithstanding the increase in population there were 1,070 such deaths; 415 less, a reduction of 28 per cent. The most important known cause for this was the adoption of sanitary inspection of milk by the board of health."

When you add to mere sanitary inspection of milk in the market sanitary control of the production and delivery of milk to the market we may not only hope for (as I wrote it first) but we shall have a much larger reduction.

The last utterances made in the world on the subject of sanitation were at the International Medical Congress held in connection with the World's Fair at Paris this month. One section of this great meeting of medical men from all over the world, including Norfolk, was devoted to public hygiene. The president of the section, Professor Brouardel, made an opening address which I have received direct from Paris. I translate a few paragraphs to show what is in the minds of sanitarians the world over:

"Public hygiene no longer has to do with promises. You have placed splendid proofs of its beneficent work in the halls of the Universal Exposition. Let those who still doubt pass through the Pasteur exhibit and the annexed spaces so brilli-

antly occupied by Germany, Austria, Italy and Great Britain, and the Pavilion of the city of Paris, and the galleries of the Field of Mars, where the foreign nations have their exhibits. They will see irrefutable proofs of the progress made in ten years. If the visitor is not familiar with the means employed in sanitation to protect the people against contagious diseases, let him satisfy himself by casting his eye over the charts where are drawn the curves of general mortality and the special mortality of each disease. He will satisfy himself that those whose origins are known have all diminished, according as the rules have been applied with more or less system and vigor. The bureaux of hygiene of the different States of North America have set forth these results in tables of admirable perspicuity.

"Germany has furnished a document more striking still. She presents a map of Europe upon which are indicated, by graded tints, the ravages of small-pox in the countries where vaccination is obligatory, in those where it is advised by all classes of physicians, and finally in those where it is not or is hardly practiced. In studying this map one cannot forget the remark of Lorain in an eulogy of Jenner (the discover of the practicability of vaccination), 'in the nexce generation one will rate the civilization of a people by its number of fatal cases of small-pox.'

"As much can be said of typhoid fever; it disappears when is provided for the use of the population a drinking water free from all contaminations." (This fact is more strikingly demonstrated in the city of Paris than in any other place I know of. They have two water supplies, at least in parts of the city, one from the river Seine for other purposes and one from aqueduct water for drinking. People are constantly drinking from the wrong fauset with results that simply confirm this observation.)

"But small-pox and typhoid fever are not the only diseases that can be prevented. Thanks to methods of disinfection when these methods are aptly applied and when they are applied from the first cases the mortality of all contagious diseases has decreased in Paris one-quarter in less than ten years. It is not hygienists alone who ought to signify their grateful acknowledgments to savants; it is also the mothers. They know that their children are two times less likely to be threatened by diphtheria than they were five years ago, and if the little ones are attacked they have the consolation of thinking that the likelihood of fatal issue is diminished four-fifths.

"We have before us a scourge which on the old continent makes more permanent ravages than the most fearful plagues. One-fourth of the population succumb in the havoc of tuberculosis. As the outcome of the labors of Professor Villemin, of Val de Grace, we know that this affection is communicable; thanks to R. Koch we are acquainted with its germ. We know equally well that it is curable." (It is to cure consumption in its early stages that sanitariums are established.)

"In England you have by a series of laws, the first of which dates from 1837, which period a certain hygienist has called 'the Victorian Era,' rendered salubrious your dwellings, your streets, your shops, your schools; you have expended to this end hundreds of millions; you have been largely paid back for your sacrifices. In thirty years your mortality from tuberculosis has diminished one-half. You are the people of Europe upon whom consumption lays its lightest levy.

"In Germany you have established for the healing of those who are tainted by tuberculosis about a hundred sanitariums, We owe it to pay homage to all those in England, Germany, Switzerland, Russia, Italy and Sweden who have followed this lead. The problem is not in the hands of the savants and the hygienists alone. We have during the past thirty years associated in our labors engineers, architects and all those who interest themselves in the life and the health of their fellows.

"Sirs, over the dawn of the nineteenth century we can inscribe the name of Jenner; over its decline that of Pasteur. Humanity in its full entirety can rejoice; there has been done for it in this century more to oppose misery, sickness and death, than in any one of the centuries that have preceded it. The twentieth century is going to register like successes. I have not a doubt of it. The past gives pledge of the future. Thanks to you we shall succeed for the highest good of humanity."

NORTH BRANFORD—DR. CHAS. W. GAYLORD, *Health Officer*.

There has been no epidemic of contagious diseases of any kind. One case of measles came under my observation. With this one exception the town has been entirely free of acute infectious disease during the year. This one case of measles was contracted in New Haven; was immediately and completely isolated and no secondary case developed.

Existing nuisances have not been noticed.

Methods of garbage disposal same as in former years, viz., by cesspool and surface drainage mainly.

In a hilly township like this, the dwellings mostly isolated, the latter method, with proper care may easily be made safe and effectual.

Early in September I called the attention of the proper school authorities to the necessity of putting all school buildings and grounds under their care in proper sanitary condition for the opening of schools. So far as I have been able to inspect have found conditions satisfactory. Shall inspect remaining buildings and grounds during present month.

Am sorry not to be able to add to my report of this year anything additional in regard to milk supply. I consider this a matter of great importance to the town and producer as well as the consumer, and it was my intention during the past year to so familiarize myself with the best methods of procuring and caring for milk; that by conference and united effort on part of those directly interested, improvement on past methods might be secured, but press of other business and distance prevented. I am, however, satisfied from what little observations I have been able to make, that there is among the producers a steadily growing interest in the matter and an intelligent effort is being made to deliver to the consumer a purer article than in former years.

NORTH CANAAN—DR. CHARLES W. CAMP, *Health Officer.*

There was an epidemic of measles; the first case was contracted in Torrington. No scarlet fever. There were six cases of diphtheria; do not know the origin; they were strictly quarantined and no other cases resulted. We had an epidemic of whooping cough, but no deaths from it. There has been no excessive death-rate.

Very few complaints of nuisances; four or five abated.

The sanitary condition of the school houses and the other public buildings is good.

The water and ice supply pure and good.

I have no personal knowledge of the methods employed by the milkmen to protect the purity of their milk.

Have had a survey for a sewerage system and hope to be able to get it through.

NORTH HAVEN—DR. R. B. GOODYEAR, *Health Officer.*

There has been no contagious diseases of a serious character in the town during the past year. Those noted have been of a mild type; no fatal cases. A few cases of la grippe during the winter months were observed.

Measles, diphtheria and whooping cough have been prevalent to some extent.

Measles were imported from the eastern part of the State into the First District, Clintonville, in the early part of June. From this case two families were infected. In the early part of December measles were imported from New Haven, into the Third District, Montowese. The attendance in school was much reduced for a few weeks by its prevalence. The number of cases of measles in the town is thirty-five (35). If more promptness were observed in reporting first cases of contagious diseases, epidemics of these diseases might be limited, thereby saving much sickness in the community.

Whooping cough was noted in early spring, and became epidemic during the summer. It was most prevalent in the Seventh and Eighth Districts; probably fifty cases have been observed.

Diphtheria has been (four cases) reported; three families have been affected; these were quarantined and the rooms disinfected; no further infection.

Tonsillitis was noticed during the winter. All cases of this character, when observed, were cautioned and treated as suspicious cases that might be diphtheritic where least suspected.

As no bacteriological examination is made of these "mild cases" of sore throat, the infection of diphtheria may be lurking in some, ready to do its deadly work at an unexpected moment. Parents and teachers have been warned that cases of sore throat occurring in children under their charge should be promptly treated, and that any neglect in this line may result seriously.

The town has been exceptionally free from consumption for several years.

It is due to the dairymen of this town to state that the subject of pure milk supply has been much investigated, and that a marked improvement has been made in the care of stock, in methods of treating the milk preparatory to its trans-

portation, and in cleanliness in cooling and in the process of milking. There are, however, vital questions in the matter of pure milk supply that affect the interest of producer and consumer.

A rule has been adopted by the health officer, prohibiting the spitting upon the steps, platform, or floor of any street car passing through the town of North Haven. Notice of this rule was posted, as the law requires.

Six nuisances have been abated; four were complaints and two were abated without complaint.

There are four sources of ice supply; one is for public distribution; three are for storage for private use; all in good condition. There are several smaller private sources of supply not included in above.

There are seven school houses and ten schools. All of the buildings have been inspected previous to the opening of the schools, and put in good sanitary condition. The public buildings in the town are all in good condition.

The water supply is from wells; these have been exceptionally low, owing to the continued drought, some having given out entirely.

NORTH STONINGTON—DR. E. H. KNOWLES, *Health Officer*.

No unusual number of contagious diseases. There were during the months of March, April and May thirty-three cases of measles reported, most of them in a mild form with no deaths. One case of scarlet fever in the month of January; no secondary cases developed. One case of diphtheria was reported; the house was at once quarantined and no other cases occurred.

No other cases of contagious diseases have been reported; no cases of tuberculosis acquired from tuberculous milk have occurred.

But one complaint of nuisance made, which was immediately abated.

There has been no improvement in the method of garbage and sewage disposal.

The sanitary condition of the school houses and other public buildings good.

The water supply of the town is from springs and wells, and is of good quality.

No ice ponds examined.

The dairymen of the town immediately cool their milk and keep their stables well ventilated and clean, good care is also taken of their dairy utensils.

CITY OF NORWALK—DR. WM. J. TRACEY, *Health Officer*.

The infectious diseases reported during the year were: Measles one hundred and twenty-two, scarlet fever sixteen, diphtheria seven, and typhoid fever ten.

Measles—The type of the disease was mild.

Scarlet fever—Was also of a mild type.

Diphtheria—In December this disease broke out among the children attending the Center School; five cases being reported. By promptly closing the school, by isolation, etc., what promised to be a serious epidemic was prevented.

Most of the cases of typhoid fever gave a history of having used well or spring water.

Nuisances—During the early spring of each year a sanitary inspection of the city is made, resulting in most of the nuisances being detected and abated before the warm weather.

School houses—The sanitary condition of our schools is good.

Milk supply—Each year an inspection of the cattle is made by the State Commissioner of domestic animals. A sanitary inspection is also made of the dairy.

TOWN OF NORWALK—DR. WM. J. TRACEY, *Health Officer*.

The statistics of the past few years prove that Norwalk is one of the most healthy towns in the State.

The last report showed that only one of the thirty-five towns in the State with a population of over 5,000 had a lower death-rate.

While congratulating ourselves on this record, let us ever remember that eternal vigilance is necessary to ward off the dangers which the aggregation of large numbers of people in cities and towns invariably entails.

The infectious diseases reported during the year were as follows: Measles one hundred and three, scarlet fever nine, diphtheria seven, and typhoid fever seven.

Measles—The type of this disease was mild. In February an epidemic broke out in the County Home. During April, May and June the disease prevailed generally throughout the town.

Scarlet fever—Nine cases. This disease was also of a mild type.

Diphtheria—Three of the seven cases reported of this disease occurred in the County Home. Of the remaining cases one occurred in Rowayton, one in East Norwalk, one on Connecticut avenue, and one in West Norwalk.

Although these two diseases, the most fatal of childhood broke out in different sections of the town, by maintaining a strict quarantine and by thorough disinfection their spread was limited.

Typhoid fever—Seven cases of typhoid fever were reported; the type of this disease was severe.

Two of the above cases occurred in East Norwalk, one in Winnipauk, three in one family on Roton Hill, and one in West Norwalk. All the cases gave a history of using well water. On investigation the source of the water supply was found to be not above suspicion.

Tuberculosis—It is estimated that one-third of the human race are attacked by this disease sometime during life, and that one-seventh die of it.

The infectious nature of this disease is no longer disputed. A striking example of this was recently furnished us by a German Labor Bureau; twenty clerks employed in this bureau were taken sick with consumption, all of them having worked over records which upon examination were found to be infected through and through with tubercular bacilli; further examination showed that they had been infected by a consumptive clerk who had the habit of moistening his fingers whenever he turned the pages of the record book.

We have had many sad examples in our town during the past few years where one member of a family has contracted the disease from another who was afflicted with it.

This disease should be treated as an infectious disease. Patients suffering with it should be plainly told its nature so that they may take the necessary precautions to prevent infecting others and reinfecting themselves.

The disease is usually contracted by inhaling tubercular dust arising from dried sputa.

The public should become interested in this subject: without their coöperation little can be done.

The facts should be known that this disease is not hereditary but infectious; that it is curable if taken in time, and best of all it is preventable.

Nuisances—My attention was called to the existence of seventeen nuisances, consisting chiefly of neglected privies, drains and pig styes, collections of garbage, and unburied carcasses of dead animals.

A piggery existing on Connecticut avenue, has been tolerated for some time. Within the past few days notice has been served on the owner of the property to abate the nuisance.

A dumping ground in East Norwalk on Keyser avenue has become a nuisance to the neighborhood.

Provision should be made by the cities to collect and dispose of their garbage. We are behind the times in this matter.

Isolation hospital—Norwalk should have an isolation hospital for the care of infectious diseases. Effective isolation in boarding houses, hotels, tenement houses, and in some private houses is sometimes impossible.

Such a hospital should be considered one of the necessary permanent institutions of our town.

Water supply—The water supply of both cities at times, is not suitable for drinking purposes for man or beast. At times the horses refuse to drink it, and we must admire them for their judgment.

Many wells and springs in the thickly settled portions of our town are polluted. Case after case of typhoid fever have been traced to their use.

How much longer will the public be compelled to choose between the clear, sparkling, refreshing yet polluted and dangerous well and spring water and the turbid, offensive city water?

Shall we permit the present conditions to continue and encourage an epidemic of typhoid fever, or furnish the public with a bountiful supply of pure water and abolish the wells and springs which are known to be contaminated?

Ice ponds—It is conceded that a body of water which from its conditions and surroundings, would not be considered as a good source of water supply, should not be used to cut ice

from. Would many of our ice ponds be considered a good source of water supply?

The common belief that in freezing, water purifies itself from all kinds of contamination has been proven to be quite untrue. Unfortunately the germs which cause typhoid fever are not readily killed by cold and may remain alive for months fast frozen in a block of ice. The same may be said of tuberculosis. Portions of tuberculous lung after being frozen for four months, when injected into a guinea pig, produced the disease in the animal. It would be well for the public to consider these facts, when purchasing ice, and also bear this in mind while using the same.

Milk supply—Every year an inspection is made of our milk dairies, particular attention being paid to the health of the cows, the condition of the stables, the water supply of the dairy, the care of the cows, etc.

East Norwalk abounds with nuisances, some due to natural causes, others created by its rapid growth.

These nuisances can be properly abated in one way, and one way only, viz., by the introduction of a system of sewers.

CITY OF NORWICH—DR. W. K. TINGLEY, *Health Officer*.

The health of the City of Norwich has been unimpaired by epidemics during the past year except, perhaps, the visit of what seems to be our annual disease, "la grippe."

Measles was limited to five or six scattered cases. Two cases of scarlet fever, very mild in character, were reported. Diphtheria at one time had a threatening aspect, but after two families were cleaned and quarantined, the disease disappeared. There were nine cases of diphtheria reported and a few other cases found out. There was a great tendency to nasal diphtheria, and the cases so complicated were all fatal. Antitoxin was used in a number of the cases with good effect. Very few cases of membranous croup were found, but whooping cough was rampant in the city during most of the year. Typhoid fever has been reported freely during August; it has been very mild, and up to date only one person had died from it. The disease is scattered over the city and cannot be traced to any one source of infection. Pulmonary consumption is not very prevalent here.

There were one hundred and ten complaints of nuisance. These were all abated and no complaint was made later. Twenty nuisances were abated without complaint.

Garbage is carried on to city dumping grounds.

Our sewers all empty into the river and except at exceptionally low tides there is no trouble from that source.

We have an old, useless pest house for small pox. The sanitary condition of the school houses is good and the public buildings are in good order. The water supply has been uncontaminated during the year.

We are constantly adding sewers to our streets, and are making an effort to increase our water supply by building a new reservoir.

TOWN OF NORWICH—DR. E. H. LINNELL, *Health Officer*.

There have been fewer cases of contagious diseases than usual—only thirty-two in all have been reported; less than half the number occurring during the preceding twelve months. Of this number there were but five of scarlet fever. Diphtheria and typhoid fever have prevailed to a slightly larger extent than last year; my records showing seventeen cases of the former and ten of the latter disease. This is really a very small number considering the large extent of territory covered by the town, and the numerous factory villages included, so that the past year may be regarded as an unusually healthy one so far as contagious diseases are concerned.

But few nuisances have been complained of, and the only other services I have been called upon to render have been an investigation of the ice ponds and of the school houses.

OLD LYME—DR. J. L. BURNHAM, *Health Officer*.

An epidemic of measles visited our town, and numbered fifty-one cases before it subsided. Two young men contracted the disease either in New London or on the train home, and were taken sick on the same day in different parts of the town. One, a grocery clerk, had every chance to spread the infection before the disease was known to exist. All cases were placarded, three of the schools temporarily closed and the school houses fumigated before reopening. One mild case of diphtheria was quarantined and house fumigated.

Instructions as to care of sputum is our main effort in regard to pulmonary consumption. We believe we have no tuberculous milk.

One complaint of a nuisance was received, and at once abated. Several minor nuisances were abated without the formality of a complaint.

The sanitary condition of our school houses and other public buildings is good. The water supply is entirely from wells and in most cases is above suspicion as witness the entire absence of typhoid.

I have to report a lamentable apathy on the part of parents and school board in regard to the vaccination of school children. A very large per cent. have never been vaccinated.

OLD SAYBROOK—DR. JOHN H. GRANNISS, *Health Officer*.

The year was characterized by an almost entire absence of contagious disease, but a few scattering cases of measles, scarlet fever, whooping cough and typhoid fever have occurred.

Pulmonary consumption is rarely reported as a cause of death. No excessive death rate has occurred.

There has been but one complaint of nuisance, and that was readily abated.

I think there is a growing interest in the disposal of garbage and sewage; each household acting for itself, but with increased care in its removal and destruction.

The sanitary condition of the school building I believe to be above the average.

No complaints have been received as to the condition of ice ponds, nor have any been examined.

I believe our dairymen are exercising an increased amount of care in the treatment and management of their stock and milk.

No public works of sanitary influence have been undertaken.

ORANGE—DR. C. A. BEVAN, *Health Officer*.

Contagious diseases—We have had no epidemics of any kind, and no cases of contagious or infectious diseases have been reported, with the exception of six cases of measles; three in April and three in June.

There has been no excessive death rate from any particular cause.

Nuisances—Only thirteen complaints have been received the past year, all of which have been abated. Eight have been abated without complaint.

Garbage disposal—The same that is practiced in every farming community. There is a large amount of garbage brought into the town from the city of New Haven, which is fed to pigs. This causes a great deal of trouble at times, and while there have not been so many complaints the past year from this source, yet the matter is receiving careful consideration from the health officer so that he may bring it more directly under his control.

Sanitary condition of public schools—The sanitary condition of most of our school buildings is anything but good. Poor ventilation and heating facilities and poor light mark the condition of all with perhaps the exception of the Orange High School, which is somewhat more modern in construction than the others. There seems to be a dislike on the part of the committees of the different districts to keep the buildings in first class repair. Broken blinds and window glass, underpinning falling in pieces, and a lack of fresh paint are some of the characteristics of our district schools. The worst case is that of the western district, which has just been condemned by the Board of School Visitors. It would seem as if district committees should see that a well lighted and ventilated school room with modern heating facilities, and bright pleasant surroundings were conducive to the health and best interests of their children, so that they may escape the eye-strain of poor lighting and the physical disabilities of poor ventilation and heating.

The water supply is derived from wells, both open and driven, and also from springs. Some of these are contaminated from barnyards, privy vaults and cesspools, also from animal matter thrown out upon the surface of the ground.

Ice ponds—There are three in the town, which upon inspection were found in good condition, excepting a pigpen located on the banks of a stream emptying into one of them. This was removed by my order.

Milk Supply—There is no system of inspection by the health officer of this important food supply. The methods of milking, care of the milk and stabling of cows is much the same as in

years past, although there are some producers who seem to realize that their market depends upon the purity of their product.

OXFORD—DR. LEWIS BARNES, *Health Officer*.

We report a very fair bill of health for our town. An epidemic of influenza and pneumonia existed during January, February and March. Tonsillitis was very prevalent during the late winter and spring months. One case of diphtheria was reported in January, a second in April. Aside from these we have no contagious or infectious cases to report. Disease has been mild; but few attacks were severe, and there has been a lessened mortality during the past year. For two or three years we have been remarkably exempt from contagious or infectious disease, although our people in their business relations are in close contact with somewhat populous centers. The origin of the diphtheria is unknown. There were no secondary cases. The first case was not quarantined for the obvious reason that the patient was discharged and abroad on the second visit of the physician. Covering the entire period of both attacks of diphtheria there was an epidemic of tonsillitis. A majority had it. Some suffered severely, others mildly. Some of the cases underwent suppuration. Some showed follicular exudation. A large part met with speedy resolution. Again in the same school district, closely adjacent but in an adjoining town, were four deaths which occurred the last of March and within a period of ten days' time. Here again was a diphtheria scare, occurring during the same period of tonsillitis. There were two homes well apart from neighbors, but having frequent intercourse, as the homes of a brother and sister. However diagnosed, these cases were not quarantined. The salient points of the disease were certainly those of acute enteric fever, modified by the asthenia of very old, feeble and nervous subjects. The contributory factors were at both homes, wells and cellars filled with surface water from the copious rains of a month previous. The cellars were close and abundant with a winter's and other decay. The wells being under the same roof there was interchangeable drainage with the cellars. The whole being seen by County Officer Hoadley formed a picture in his memory of *why we do not live*. Leaving alone the feeble, the homes were

dangerous for well people. No scientific tests were made of the disease.

The second case reported to me as malignant diphtheria was quarantined (with a shaken belief as to its nature) and fumigated the same week by request of the one in charge, as the patient wished to leave town. The surroundings here were very cleanly, but a case of influenza with severe complications existed in the same house.

Of the influenza and pneumonia of the early months of this year, it may be stated that those living in the drier atmosphere of the hills escaped the epidemic. Its locality was along the water courses, where an excessive humidity with great and sudden changes in the evening temperature aided its inception.

Of nuisances there were four complaints, all of which were cheerfully abated without costs. My attention was called to an open trunk filled with children's clothes and trinkets, which lay unearthed near a rented home. The mystery was solved by a former tenant, who said that three of her children died of diphtheria in Ansonia, some five years ago, that she packed their belongings in the trunk, but being frequent movers and tired of the trunk, had buried it where found. It was cremated. Unlike Pandora's box, no ill escaped. I marked one against Ansonia.

The sewage question, while an open one in our cities and practically unsettled, is not a burning one in the country, so long as our common method of surface or tile drains with cess-pools are kept apart from the wells and water supply. No provision is made for the care of contagious disease.

School house sanitation is fair, but some of the rooms are small, with imperfect ventilation.

The water supply is pure and generally copious. Our people are instructed by the newspapers that there are certain water-borne diseases which can be avoided by care and cleanliness. In proof of this we point with pride to our monthly sanitary returns.

Since our sanitarians have taught our farmers that even in milk "there is death in the pot," our milk producers and butter makers are adopting plans for cleanly stables and clean cows with dustless udders, emptying their lacteals into bright pails, made chemically clean by pure water and constant air and

sunshine. And now they have learned that it must not stand in the open awaiting other labor, but must immediately be prevented from undergoing decomposition, and by constantly improving methods fitted for market, and the nearer this is with the milk supply the better for all parties.

PLAINFIELD—DR. W. W. ADAMS, *Health Officer*.

All cases of measles have originated out of town, no secondary cases having resulted; while most cases of scarlet fever have originated in the town; no epidemic has occurred and cases have been mild.

The one case of diphtheria reported was a person visiting in town from Hartford. This case resulted fatally, but no secondary cases.

There have been a few mild cases of whooping cough, and no cases of typhoid fever.

In the cases of pulmonary consumption coming to my notice, the sputum has been disinfected and the patient isolated as far as possible.

Three nuisance complaints have been abolished.

School houses and public buildings are in a sanitary condition.

The water supply is obtained from wells. I have no personal knowledge of the precautions taken by dairymen.

PLAINVILLE—DR. J. N. BULL, *Health Officer*.

Four cases of measles, three of whooping cough, three of diphtheria, two of typhoid fever, were the infectious diseases reported. Malaria in all its usual manifestations was a frequent cause of sickness, with no fatality. Several cases of tuberculosis developed during the year and without traceable cause. Gastro-enteric affections for the most part mild.

Numerous complaints of nuisances entered, and the cause abated. No addition has been made to our method of garbage and sewage disposal, and danger and inconvenience from this respect is rapidly increasing. Sanitary condition of all public buildings satisfactory.

Water from public reservoir is abundant, but unfortunately not savory in the summer months, and wells are in danger of contamination at all times. There is no danger of impurities from present source of supply.

Again I recommend official inspection of milk supply and instruction to milkmen of the importance of healthy stock, cleanliness of stables and of all receptacles for storage and distribution that this best of food may reach the consumer in condition safe for use. This report would emphasize for consideration the following matters:

Inspection of milk supply.

Daily removal of garbage and sewage.

Home for isolation and treatment of contagious cases.

Disinfection of sputa from all persons affected with tuberculosis.

The importance of pure water, pure milk and pure ice.

PLYMOUTH—DR. M. P. ROBINSON, *Health Officer*.

The town of Plymouth has had more than its usual quota of contagious diseases.

We were spared an epidemic of measles like that of the previous year, probably because of lack of fresh materials left from the former epidemic. In all ten cases were reported. These were all placarded. Early in December scarlet fever in a mild form made its appearance in Plymouth and, scattered through the months of December, January and February, there were ten cases reported. These were all mild in type and fortunately, no complications followed.

The epidemic probably started in a mild case, which did not come under a physician's care and so was not diagnosed. It should be understood more generally than is apparent, that scarlet fever, even in a mild form, is an extremely subtle and dangerous disease.

Not alone unfortunately is it dangerous to the individual, but by reason of the persistence of the contagion to the public as well. The instances of serious disease of the middle ear, throat and kidneys so often terminating fatally, are too numerous to disregard. Again, from a very light case another individual may contract a most serious illness. Previous to April there were three isolated cases of diphtheria. Early in April, however, diphtheria made its appearance in a Polish family in Terryville. Directly traceable to this, followed nine other cases.

Owing to the lack of a constable or other officer qualified by law to make arrests in this part of the town, quarantine could not be strictly enforced.

These ten cases were all in Polish families. From this experience, it would seem that an isolating hospital should be provided by the town where these cases which cannot be strictly quarantined could be taken and cared for. The apartments they formerly occupied might then be immediately disinfected, and danger to the community lessened. If we are to have no constable on whom to call to enforce quarantine regulations, there is no other safe alternative. There were reported only eleven cases of whooping cough, although there must have been more than twice that number which were not reported.

Typhoid fever two cases.

As evidence of a growing appreciation of the danger of contagion from tuberculosis, the health officer is pleased to report that during the year he has been called upon several times by householders to disinfect their houses after a death in them from consumption.

There were six complaints of nuisances; of these four were abated.

The sanitary condition of the school houses are improved since the town assumed their management.

POMFRET—CHAS. O. THOMPSON, ESQ., *Health Officer.*

Measles—Twenty-six cases reported in ten families; the houses were placarded, and by the willingness of parents to coöperate with the health officer an epidemic was prevented.

Scarlet fever—Four cases reported; the origin of three cases was traced to another state, and transmitted by a boy returning to school after vacation. Strict quarantine was established, and although a school of ninety boys had been exposed to contagion three cases were all that occurred.

Whooping cough—Two cases reported. I have reason to suppose there were other cases which were not reported.

Typhoid fever—Two cases reported; the origin of one case was traced to another state, the other not discovered.

Nuisances—No positive complaints have been made, but several have been abated at request of health officer.

All of the school houses, etc., have been inspected by me, and generally found in good condition, and show a decided improvement in the past two years.

The water supply comes from wells and springs generally well located.

Ice Ponds—There has been a great improvement in the selection of ponds from which ice is gathered.

Milk—I have no personal knowledge of the particulars asked for in your Circular No. 95. I have not considered it necessary to investigate the matter, as nearly every family keeps their own cow and there are no milk peddlers.

PORTLAND—DR. FRANK E. POTTER, *Health Officer*.

The following cases of contagious diseases have come to my knowledge:

Measles—For the past year this disease has spread over the State. During the autumn months of 1899 the disease was very prevalent in Middletown. As Portland is closely connected with this town by means of the trolley cars, and as the people of the two towns mingle very generally, a disease like measles becoming prevalent in one town is sure to be introduced into the other.

Early in November a few cases of the disease appeared in Portland, and by the last of the month it had become epidemic.

Eighty-four cases came to my knowledge. It would be safe to estimate the number of cases which occurred during the year as not less than one hundred and twenty-five. The type of the disease was of average severity. Only one case proved fatal.

Scarlet fever—In one of White's tenements three cases of scarlet fever occurred in September. These were secondary to a first case in the same family mentioned in my last annual report. These secondary cases need not have occurred had the mother kept the first case, that of a six-year-old girl, isolated until she had finished desquamating. This she was repeatedly urged to do.

On September 15, a boy nine years old was taken sick with the disease at Cork Hill. He was isolated and the other children in the family would have escaped had not the mother allowed her seven-year-old girl to play with her convalescing brother before she was given permission to do so. These cases were of moderate severity.

On March 23, a six-year-old girl, living on Freestone Avenue, was taken sick with the disease. She was isolated in a room well removed from the rest of the family. The other child, a nine-year-old girl, escaped the disease until April 7, when she also

became sick, because the mother, as in the two preceding cases, brought the children together before the first one had recovered. These three cases occurring in different localities plainly indicate the advantages which would be derived from an isolation hospital where cases of contagious disease could be treated. The secondary cases in every one of these three families would have been prevented had the first one been isolated for a proper length of time.

During the months of May and June scarlet fever occurred in three families in the Up City District. In one of these families where the least precaution was taken three of the cases were of a very severe type, one of which proved fatal.

The primary case in the Up City District was brought from New York City. Unfortunately this case was reported as measles. This threw the parents and the neighbors entirely off their guard. As soon as the true nature of the disease was discovered, the school was closed. This was fortunate, as later two older children had scarlet fever in a family where an earlier first case had not been reported even to the parents. As soon as the disease was discovered to be scarlet fever the houses were placarded and the children isolated and there was no further spread of the disease.

From June 5 to June 28 four cases in as many different families were reported at Gildersleeve. These were all of a mild type. The source of the contagion is not known. Since June 28 no further cases have been reported. In all there have been twenty-one cases during the year, with two deaths.

The history of these cases, as well as that of former years, indicates that there are two points which are especially to be guarded. The first is prompt isolation of the primary case; the second is to keep the child isolated until desquamation is complete. Wherever these two points can be secured, there will be but little spread of scarlet fever. (Thorough disinfection is of equal importance. C. A. L., Sec'y.)

Diphtheria—Eight cases of diphtheria were reported. These eight cases were confined to five families living in three different houses. The primary case was that of a man who, a short time previously to his being taken sick, had crossed the Atlantic in the steerage. Two subsequent cases developed in this same family; one of which was fatal. In another house, where the drainage is known to be bad, there were two severe cases in

different families; one of these proved fatal. Then there were three cases in the two families occupying the third house. These were severe, but recovered.

Typhoid fever—Five cases have been reported, with three deaths. One of these cases occurred at Gildersleeve and it was supposed that the man became infected while traveling.

Three cases were reported in Freestone Avenue, all in nearly the same locality. The source of infection in these cases is not known.

Typhoid fever is so widespread and so serious a disease that the use of unboiled river water for drinking purposes, and the practice of putting river ice directly into drinking water should be discontinued.

Nuisances—The nuisances complained of have been offensive sink drains, overflowing cesspools and uncleaned privy vaults.

Garbage disposal is by means of garbage heaps.

Sewage disposal—This is one of the problems for Portland to solve. There is a large amount of city water from the hydrants being thrown into the town, and we have no means of disposing of it and the sink drainage except by open drains or cesspools. The soil of the town is quite largely saturated with water and sewage, even in seasons of light rains. During seasons of heavy rains, the soil being previously filled nearly to the point of saturation will absorb but comparatively little; as a consequence the water finds its way to the cellars, making them damp and in not a few instances actually wet and unhealthful.

Malaria thrives under such conditions, and all there is wanting is a few primary cases of diphtheria or typhoid fever that the germs of these diseases may find their way into the sewage-laden soil, and into adjacent wells, and thus become a source of repeated outbreaks of these diseases.

It does seem imperative that the town provide some system of sewerage if we are to escape a more than average amount of sickness in the not distant future. The slope of the land is such that there is no other practicable way of securing drainage except by means of a general sewer.

The school houses and public buildings are in a good sanitary condition.

The water supply is from a reservoir. During the cold months or as long as the reservoir is full, the water is clear and

very palatable. But, as soon as the level of the water is lowered in the reservoir, the water which has set back over an adjacent swamp, and which has been standing there during the season of high water and a full reservoir, is now drawn into the reservoir and finds its way into the pipes supplying the town. During two months of this past summer the water has been of an unusually unpleasant odor and taste. During this time people who have hitherto depended upon the city water have resorted to wells and springs for their supply of drinking water. Some of these wells having been in part abandoned since the city water came into use, are of questionable purity. It may be found necessary to prevent the drainage of this swamp into the reservoir.

Ice ponds—The ice furnished by our dealers is harvested from ponds fed by springs. But these ponds are near the river and are overflowed in times of river freshets. During this last winter considerable ice was harvested from floating cakes left on the meadows after an early Connecticut River freshet had subsided.

PRESTON—DR. O. S. HARRIS, *Health Officer*.

The following contagious diseases have been reported to me in the past year: scarlet fever, seven cases; diphtheria, two cases; typhoid fever, 1 case; number of complaints of nuisances, ten, all abated.

School houses are being placed in sanitary condition.

Water supply by springs, wells and squireducts.

Milk traffic should be under compulsory supervision.

PROSPECT—JOHN R. PLATT, ESQ., *Health Officer*.

There have been twenty cases of measles or more. One case of diphtheria, but cannot trace its origin. The house was placarded and quarantined and no secondary cases occurred. The house was disinfected and thoroughly fumigated.

There has not been a case of consumption in town in a number of years. There has been no excessive death rate the past year. There has been no complaint of nuisances.

A few years ago, when an animal died, it was drawn into the field and left there to decompose. Now, when an animal dies, it is immediately buried.

Garbage is fed to swine and poultry.

The sanitary condition of school houses is good. I recommend that the Board of Education build a privy or two at the East School house. I think the law requires two. Sanitary condition of other public buildings is good.

The water supply is from springs and wells. There are quite a number of dry wells at the present time. The ice ponds are in fair condition. No ice is harvested here, except for private families.

REDDING—DR. ERNEST H. SMITH, *Health Officer*.

The following cases of contagious diseases have occurred:

Measles—Fifteen cases, of which thirteen were in one locality and came from a single case. The other two were in one family and the source was unknown.

Diphtheria—Six cases, of which four were in one family, and were traced to a single case originating out of town. The other two were isolated cases, origin unknown.

Typhoid fever—Four cases. All of these were sporadic cases occurring at different times of the year and in different localities; none of them could be traced to any positive source.

Whooping cough—Seven cases. These were all in two neighboring families, and originated in one out of town case.

Two complaints of nuisances have been made. These have been investigated and action taken.

In December an inspection of the factory pond in Georgetown was made by the health officer in company with the County Health Officer. The water was found to be badly polluted by drainage from neighboring barnyards and outhouses, but owing to the situation of the pond, it did not seem possible to remedy the evil. An order was issued, however, restricting the use of ice cut on the pond and forbidding its public sale.

RIDGEFIELD—DR. W. E. WEED, *Health Officer*.

Of contagious diseases there have been reported the following: Measles, 29; scarlet fever, 1; diphtheria, 6; whooping cough, 2; typhoid fever, 3.

The first case of measles occurred in a child which had been in New York, where measles were prevailing at the time and the subsequent cases were developed from this. All the cases

were mild, in many instances the patient not being confined in bed at all.

In the case of scarlet fever the origin was not determined.

Of diphtheria cases, five occurred in one family, with three deaths. These cases were transmitted from an adjoining town; the other case was that of a child who had come from New York but a few days previous; in both instances there was no spread of the disease.

The cases of whooping cough were children who were visiting here.

Of the three cases of typhoid fever, two were contracted elsewhere, while one was of local origin.

There has been less than the usual number of complaints of nuisances.

The method of garbage and sewage disposal is as it has been, but by the generosity of the summer residents of the town, surveys and plans have been made whereby the village would have a very efficient system of sewage disposal if adopted.

The ice pond is fed mainly by springs, with no drainage of deleterious matter into it.

There has been the introduction of a water supply derived from driven wells into the village, whereby is assured a supply of good wholesome water.

ROCKY HILL—DR. F. L. BURR, *Health Officer*.

The town has been unusually free from contagious diseases.

Diphtheria—Six cases, one case ending fatally. The usual precautions were strictly enforced.

Typhoid fever—One case.

Pulmonary consumption has been rare in this town for several years. When it does occur special care is taken as to disinfection and disposition of sputum and excrement. Said disease should be classed as an infectious disease.

Nuisances—There were three complaints, which were promptly abated. Five cases were abated without complaint.

Garbage is usually disposed of by burning.

Sewage disposal, by drain pipe and on the surface.

The sanitary condition of the school houses is better than ever before. The seats and desks, also the floors, have been thoroughly cleaned. Public buildings are all in a good sanitary condition.

The supply of pure water is not very abundant in consequence of a prolonged drought.

The supply of ice is fairly abundant. We have only one ice pond, and it is in proper condition.

ROXBURY—DR. LOUIS J. PONS, *Health Officer*.

As regards infectious diseases, the health of the people of Roxbury has been better than for several years past.

Malaria was quite prevalent along the Shepaug river during the months of July and August. Nearly all of the cases being of the Quotidian and tertian nature, about 80 per cent. occurring in workmen on the quarries, who were exposed to the long continued and excessive hot weather. In my opinion this disease was due to the general depression and low vitality, caused by the heat and poor supply of drinking water. From June to September, all of the wells and springs were very low, while about one-half of them were entirely dry.

Diphtheria—Four cases of a severe type.

Whooping cough—Four cases.

Four cases of typhoid fever reported.

I am not aware that there exists a case of consumption here at present.

Nuisances—Number of complaints, five; number abated, four; number abated without complaint, one.

The sanitary condition of the school houses is gradually improving, especially as regards the ventilation and water closets.

The water supply comes mostly from wells, a few houses being supplied by springs, and is generally of good quality.

SALEM—DR. C. F. CONGDON, *Health Officer*.

During January measles were brought into town, probably from New London: In January and February, there were twenty-four cases. In March, New London again furnished us one case with one secondary infection.

In December, there was one case of diphtheria and another in January. No origin of either case could be discovered. A rigid quarantine prevented any further spread of the disease.

In December, I received notice of a case of scarlet fever. Later in the month the same child was reported sick with whooping cough.

The only case of chicken pox was imported from New London in April. There were no deaths from any of these diseases.

In August, I inspected the school buildings of the town. In most of the districts the outbuildings were found to be in a deplorable condition and a menace to the health, comfort and morals of the children.

In the Fifth District it was found a new outbuilding had been built during the summer. The teacher gave me assurance that as long as she remains in the school, past sins will not be repeated, if she can prevent it, by diligent care and admonition.

Written notices have been sent to the various committees, calling their attention to the needed improvements and suggesting that the matter be attended to without unnecessary delay. I am glad to say that in one instance, at least, my advice has been heeded, and hope that very soon every school will be provided with a clean, respectable outhouse, and that school officers, teachers, parents and children will all unite in seeing that such places are not abused, defaced nor allowed to become a public nuisance, morally and physically, as many of them now are.

SALISBURY—DR. WM. B. BISSELL, *Health Officer.*

Measles in epidemic form covered a period extending from early October to March inclusive. The disease was mild in type, except at the Institution for Imbecile Children, where it occurred in malignant form, and out of some sixty odd cases several died. A mild case of scarlet fever was reported in October. Diphtheria appeared in August as an isolated case. A case of membranous croup occurred in February. Whooping cough was epidemic during January and February. We have had three cases of typhoid fever during the year, but each of these was in a different part of the town.

Fewer nuisances have to be remedied each year. Garbage and sewage are still disposed of in primitive fashion.

The sanitary condition of our school houses and public buildings is as good as can be expected.

Our water supply comes from the best of sources and our ice ponds seem to be well adapted for the use to which they are put.

The only efforts possible, at present, for the restriction of consumption consists in the posting of placards, prohibiting spitting in public places and the instructing of patients, and their families, in regard to the contagious nature of the disease and its methods of dissemination.

As to our milk supply, the fact that a goodly share of the milk is taken by a condensed milk factory—and is consequently under surveillance to a greater or less extent—has proved a most salutary measure and one not without effect on all the dairymen in town.

SAYBROOK—DR. H. T. FRENCH, *Health Officer*.

Contagious diseases have been reported during the year as follows:

Scarlet fever, eight cases; measles, eight cases.

The scarlet fever cases, all of mild type, were isolated until desquamation was completed, when the room occupied by the patient, and in some cases, the whole house was disinfected in the manner recommended by the State Board of Health.

The schools were not closed, but every effort was made to keep all children of the families in which a case of scarlet fever had occurred, at home, until after the premises had been disinfected. The school building was fumigated under the direction of the Board of School Visitors.

In each instance the first case of measles reported was contracted out of town. The houses were placarded until it was thought that the patients had recovered, but no other attempt at isolation was made.

Whooping cough has been somewhat prevalent since June, although no cases have been directly reported.

The few nuisances complained of were promptly abated, and the sanitary condition of the town is, as a whole, good. A few sink drains discharge their contents near dwellings and occasionally an outhouse and well are located so near to each other as to make it probable that, under favorable conditions, poisonous material from the former might reach the latter, but a sense of self-protection impels the owners or occupants, in most instances, to keep these places in as cleanly a condition as their nature will permit.

Very little garbage is deposited in the highways, or in out of the way places, as the selectmen provide a dumping ground for public use, and keep the same in good condition.

SCOTLAND—ARTHUR M. CLARK, ESQ., *Health Officer*.

There has been no contagious diseases reported to me during the year, excepting measles. There were thirteen cases of measles known to me; one of them proving fatal; the cases being confined to four different families.

There was one nuisance complained of which was quickly abated.

The sanitary condition of school houses and public buildings is good.

The water supply for the school at the present time is poor, owing to the poor condition of wells caused by low water.

In regard to milk I have no personal knowledge of the matter.

SEYMOUR—DR. FRANK A. BENEDICT, *Health Officer*.

During the past year we have had no epidemics of any kind, only some scattering cases of measles, scarlet fever, diphtheria, typhoid fever, whooping cough, and cerebro-spinal fever.

The cases of contagious diseases that have occurred have been so different that it has been impossible to give the cause of their origin and in almost no cases have secondary ones followed except in a case of typhoid fever, where other members of the family acted as nurses, and were afterward afflicted with the disease.

Seven complaints of nuisance have been received and adjusted satisfactorily.

A public collection and disposal of garbage in a proper manner would be a very decided benefit to the town.

The town now has a public water supply, and sewers are very much needed.

The sanitary condition of the school houses is good. The water is from a public water supply and wells. The public supply being from a new pond is at present not very palatable and the wells are more used to supply water for drinking.

During the past year a large and beautiful tract of land has been presented to the town for a public park, and as soon as this is put in proper condition will make a great addition to the town.

SHARON—DR. ROBERT P. KNIGHT, *Health Officer.*

With the exception of an epidemic of measles in early summer and a few scattering cases of whooping cough last fall after our epidemic one year ago, Sharon has been and is in a healthful condition.

There have been no nuisances.

Our sewerage is by surface and private cesspools.

The sanitary condition of school houses and public buildings is good.

Our water supply is from a lake situated one mile and a half away; entirely fed by springs. Most of our ice is gathered there; although some is taken from other lakes and private ponds.

Those farmers who sell milk, send it to the factory of Borden's Condensed Milk Company, and their dairies are under its control. The company is particular in the extreme, sending its own inspector and veterinary when least expected, to examine mode of milking, care of cows, stables, etc. Each farmer's milk is examined separately and memoranda kept.

SHERMAN—DR. JOHN N. WOODRUFF, *Health Officer.*

Contagious disease has been almost wholly absent.

We have had one case of scarlet fever, the only case of contagious disease of any kind.

I do not believe there is a single case of pulmonary consumption within the town. The death rate this year is smaller than usual.

The school buildings have been kept in a sanitary condition, and all other public buildings are in good order.

The water supply comes from wells and springs, and of good quality.

Ice supply is good, taken mostly from private ponds which are kept in a proper condition.

A large percentage of our milk is taken to the creameries, and before being received it must come to the required standard in every respect, in regard to cleanliness, method of cooling, etc.

SIMSBURY—DR. W. R. MUNSON, *Health Officer.*

My appointment dates from June of this year.

There have been during the last three months two cases of measles; five cases of scarlet fever; two of whooping cough, and one of typhoid fever.

There have been seven nuisance complaints, of which four have been abated and three are in process of abatement.

The garbage is largely disposed of by burying.

Sewage is disposed of by means of cesspools.

Ice is cut mainly from the Farmington river and at points where contamination is impossible.

SOMERS—DR. H. L. HURD, *Health Officer*.

My services have been required in an unusual number of cases, owing to the prevalence of measles, whooping cough and scarlet fever. Measles were epidemic from March to July. General disregard of all precautions and regulations by one of the attending physicians caused a more general spread of measles and whooping cough than was necessary.

Of scarlet fever there was no reason why there was not a general epidemic, for it got well started before the health officer found a case.

Of the cases that came to the notice of the health officer, there were one hundred and eight of measles, five of scarlet fever, two of membranous croup, and about fifty of whooping cough. No cases of typhoid fever were reported.

The school buildings were fumigated in order to prevent the spread of the contagious diseases that prevailed during the summer months. The sanitary condition of the school buildings is fairly good.

Nothing has been done during the year in regard to the supply of water; yet, it is not impossible that in the near future the two villages may be supplied with good water.

SOUTHBURY—DR. SAMUEL GREEN, *Health Officer*.

The following report includes the period of time from April 5th, the date of my appointment, to October 1st, 1900.

Three cases of measles, all of a mild type, were reported; one was traced to Hartford. Every precaution was taken, and no secondary cases occurred. There were no other contagious diseases reported.

I know of but two deaths from consumption in the town.

There has been more sickness than usual, and a slight increase in deaths; most cases being old people.

Three complaints of nuisances were made and abated.

The method of garbage disposal as a rule is for manure.

Sewage disposal is mostly surface through pipes and open drains.

The sanitary condition of school houses are very good, the privies in some cases needed attention, and the committee was notified.

The water supply is from wells and springs.

Of ice ponds I know nothing.

SOUTH NORWALK—DR. WILLIAM J. TRACY, *Health Officer*.

According to the reports received from the attending physicians, the infectious diseases which prevailed during the year were as follows: measles, 83; scarlet fever, 11; diphtheria, 4, and typhoid fever, 10.

Measles—An epidemic of this disease occurred during April and May. The type of the disease was mild.

Scarlet fever—This disease was also of a mild type.

The diphtheria cases were of a severe type.

Typhoid fever—Most of the cases had been using well or spring water. The city is densely populated, and most of the wells within the city limits are polluted or will soon become so.

Provision should be made to filter the city water and make it less offensive and abandon the wells and springs.

Nuisances—The sanitary inspector attends to the abatement of nuisances.

School buildings—The sanitary condition of our school buildings is good.

Milk—Each year an inspection is made of the cattle furnishing milk sold in the city. A sanitary inspection is also made of the dairy.

Milkmen are required to be licensed, and are compelled to keep their cans covered.

SOUTH WINDSOR—DR. H. A. DEANE, *Health Officer*.

There have been reported the following diseases, viz: measles, 13; scarlet fever, 3; diphtheria, 6; whooping cough, 12; typhoid fever, 3. A large number of cases of whooping cough and measles were not reported.

The deaths from consumption have been few in number. The deaths from accident and suicide have been in excess over previous years.

The cause of all contagious diseases has been duly looked for. Cases of scarlet fever and diphtheria have been quarantined. After all traces of the disease have disappeared, the houses have been fumigated and cards removed.

There have been three complaints of nuisances; all abated.

Garbage is nearly all disposed of within property limits, and outside garbage barred from entrance by a rule adopted by the town.

The sanitary condition of the several school houses is considerably improved over that of previous years. Each district committee has been requested to see that the entire premises were properly cleaned and in good sanitary condition for opening of school. Separate outbuildings have been provided in place of double ones.

The water supply is obtained from wells mainly.

The number of ice ponds is legion, mostly small ones for each neighborhood. The large ones have been examined and found clean.

The milk supply is thought to be above the average in purity. Several dealers furnish it in bottles, the milk having been aerated.

I have made personal examination of but one stable: that of Mr. Robert Ladd of Wapping. The building is large, and well lighted and ventilated. Especial care is given to the clothing of the men, and condition of the utensils for milking. The milk is aerated and put in sealed bottles for delivery. This process is said to add to the preservation of the milk, and to make it safer for use, especially with small children.

STAFFORD AND STAFFORD SPRINGS—DR. F. L. SMITH, *Health Officer*.

There has never been a year in the history of the town, when so many reports of contagious diseases have been received, nor do these reports include all.

Measles—There were 104 cases of measles reported in the town and borough; they were distributed as to locality as follows: in the borough, 54; in the town, 50. The origin of the epidemic was easily traced.

A boy from Providence, who was visiting a family living in one of the "Shahan blocks" at the borough being taken sick soon after reaching here; particular care was taken in this case to prevent its spread, and there being no other children in the family it was hoped the disease could be confined to this case, but in due season three other children in an adjoining tenement came down with the disease and roamed about the vicinity even after the eruption appeared, ignorant of the nature of the disease, the school children were thus infected and so the disease spread, children actually attending school in the first stage of the disease, sometimes through ignorance and again from indifference. The first case, in West Stafford, occurred in the "Patten" district and was contracted in Springfield, but no others were infected from this case, save the immediate members of the family of whom five were attacked. The origin of its wide spread in West Stafford at a later date was from a boy, who having had the disease and supposing himself safe from another attack, visited a family at the borough where the disease was in progress, contracted it, attended church while in the first stage of eruption, and thus exposed a large number. The first stage of the disease is just as infectious as any after period.

Diphtheria—One case at Staffordville contracted in an adjoining town, strict quarantine was observed, and thorough fumigation employed and no more cases occurred.

Typhoid fever—Six cases, distributed as follows: three in the borough, three in the town; no deaths occurred. In each case particular care was taken to prevent the spread of the disease, all from causes unknown.

Nuisances—But one or two have been brought to the notice of the health officer, and these have been corrected; in this connection the fact that "all complaints to the health officer must be in writing, and bear the signature of the complainant,"* is

* A very effectual rule to insure animosity among neighbors, or the toleration of nuisances. This "first rule" has been misunderstood by other health officers. The word "must" does not occur in the rule. There are certain nuisances, the abatement of which cannot be enforced by the health officer unless witnesses will testify under oath. As for instance, when sewage flows onto a neighbor's premises, the signature of the complainant may be required, that he may be summoned as a witness. It was never intended to apply to all complaints of nuisances, and so relieve the health officer of his duty unless that formality was complied with.

—C. A. L.

the first of the rules of the board, should be borne in mind; people are much inclined to make verbal complaint, but when asked to go on record with their name signed, do not press the complaint.

Sewage—A partial system is in use, but it should be extended and entrance thereto made obligatory.

The sanitary condition of the school houses is good, but the privies should receive better care, as a recent tour of inspection demonstrated. The West Stafford center district should have new privies built as far as possible from the well, as at present located, they are a menace to the health of the scholars, in fact the drinking of water from the school house well has been forbidden. The borough district school house, supplied as it is with running water and sewer, should have modern sanitary water closets, thus supplied, it would be second to none in the State, as it is now a model of care and cleanliness, and such surroundings are an education in themselves to many pupils.

Sanitary condition of other public buildings, good.

The water supply is good and ample.

Ice ponds are free from contamination, one of them in particular being remote from human habitation and fed from springs.

Milk—Have no personal knowledge of the precautions taken by dairymen in regard to protection of purity of milk, save in one instance and in this one, the utmost cleanliness of cows, stables, men, and surroundings is insisted on.

SPRAGUE—DR. T. I. STANTON, *Health Officer*.

The town of Sprague has had but few contagious diseases.

One case of scarlet fever; one of diphtheria; nine of measles, and there were a number of cases of whooping cough not reported. Where patients can dispense with a physician, they do not report whooping cough or measles.

There have been no complaints made as to nuisances, although the town is not free from them.

The building of a large weave-shed, and prospects of starting the mill in the near future, will re-people the Baltic village, and will necessitate some method for the disposal of its garbage and sewage.

The sanitary condition of our school houses and outbuildings, in the main, is good, but not of the best.

Our water supply is from wells and springs.

Our milk supply is of the best. The dairymen, as a rule, take all necessary precautions to preserve the purity of their milk. Their method of milking is, night and morning, and as to the immediate cooling, it is done by water and ice. The stables of the cows are well ventilated, and cleanliness is observed. The utensils used for holding the milk is cleanliness itself.

STAMFORD—DR. J. F. ROWELL, *Health Officer*.

There have been reported to this office two hundred and fifty-two cases of contagious and infectious diseases as follows:

Scarlet fever—Thirteen cases; the majority of which were very mild.

Diphtheria—Twelve cases.

Typhoid fever—Twenty-four cases.

German measles—Thirteen cases.

Membranous croup—One case.

Measles—One hundred and eighty-nine cases reported. This represents but a small per cent. of the number of cases. I estimate that we have had six hundred cases.

Complaints—We have had six hundred and ninety-one complaints made at this office in the shape of cesspools, foul privy vaults and offensive garbage heaps. Of this number we have caused the abatement of five hundred and eighty-six.

The city provides a ground for the deposit of garbage, ashes, offal and other waste products.

At the present time but part of the city has a public sewer. The unsewered districts have a higher death rate than those portions provided with proper means for sewage disposal.

Quarantine is instituted by placarding and isolation.

The sanitary condition of the public buildings and schools is good.

TOWN OF STAMFORD—DR. F. J. ROGERS, *Health Officer*.

Since September last the number of cases of contagion reported to the health officer has been small. Although an epidemic of measles swept over the city, only six cases were noted outside, all light. No secondary cases occurred as far as known.

One case of scarlet fever and one of typhoid fever complete the list reported, both light and recovery complete.

No whooping cough was seen during the year, although in previous years several cases existed.

Cerebro-spinal fever, common in some parts of the State, has been unknown here this year, and although one case of small pox was reported last year in this city, owing to the wisdom of the city authorities and the careful attention of the health officer, no more cases were noted.

Nothing has been done in any direction to limit the ravages of tuberculosis except such as are imparted by the family physician, in regard to the destruction of sputa. The danger from the spread of tuberculosis to other members of the family is a stubborn fact recognized by all candid physicians, and too much care cannot be exercised by those in close proximity to a consumptive patient.

The mortality in the town has been forty-eight. The number of deaths from tuberculosis was seven, which is a great percentage of the whole number of deaths. This mortality rate would be much less than it is if proper precautions are taken.

The number of nuisances complained of were only two in number, and these were abated.

No improvements in the old methods of garbage and sewage disposal has been noted, but there has not appeared to be any ill effect from it, as the infant mortality is very low, showing only three under five years of age, out of the whole number of deaths.

All school houses and public buildings are in very good sanitary condition.

The water supply has always been of the best, but this past summer the taste might be improved by better filtration.

No public works to improve the sanitary condition has been undertaken, although the people in the poor house have been made much more comfortable than heretofore.

No means have been provided for examination or supervision of the products of the milk farm. Cleanliness in the utensils used, good and wholesome food to the cattle, strict observance of the rules of cleanliness of the person and surroundings ought to be insisted on in the dairy. In all cases ought swill, sour mash or other unwholesome food to be ban-

ished from the milk farm. We regret to see after banishment for quite a period, the nasty, unwholesome stuff is again allowed to be landed in cargoes and is used by some of our farmers for feed, but I hope, not to be used to feed milk cows, the product of which is sold in our city, where the infant mortality is already high. What can we expect from such a source in hot weather, if pure milk is certainly none too safe for infant feeding? Will the milk producer be honest and fair, or will he persist in being a party to assist in keeping at a fearful death rate the infant mortality of Stamford?

The number of deaths during the year was altogether seventy-five. This includes twenty-seven who died in institutions and were really not *bona fide* residents. Out of the whole number only three were children under five years of age, which certainly speaks volumes for the health of the town.

STERLING—O. W. BATES, ESQ., *Health Officer*.

Measles—An epidemic of more than one hundred cases, of which only one proved fatal. No other infectious diseases have occurred.

The physicians now comply with the law in regard to prompt reporting of cases.

The school rooms have been disinfected and I consider the sanitary condition of our schools as good as circumstances will permit.

One great difficulty is in securing practical isolation.

STONINGTON—DR. C. O. MAIN, *Health Officer*.

Our borough during the past year has well sustained its previous good reputation in its exemption from contagious diseases. We have had but two cases of scarlet fever; two of typhoid fever, and one of cerebro-spinal fever. Strict quarantine and the use of disinfectants are employed.

Garbage is removed by private parties, two or three times each week.

Our water supply is obtained from wells and from the Mystic Valley Water Company.

Few nuisances have been reported, and all abated.

Notices have been posted forbidding spitting on the floor of public buildings.

Sewage disposal by cesspool and sewers to the shore.

The milk supply is furnished by farmers who keep their own cows, and every care is taken by them to furnish it not only pure, but in exercising the strictest watch over their herds for diseases.

The sanitary condition of our high school and public buildings is good.

TOWN OF STONINGTON—DR. O. M. BARBER, *Health Officer*.

The general health of the town for the past year may be fairly called good. An epidemic of measles prevailed during the winter months among the children attending the schools of the town, which ceased when the schools were closed. Fifty-six in all were reported, none of which were fatal.

There were two cases of scarlet fever, and four of diphtheria. These were of a mild character. There have been a few cases of whooping cough not reported. There have been four cases of typhoid fever.

Six complaints have been made of nuisances, which have been investigated and abated.

Outside of Stonington borough there has been no way provided by the town for the disposal of garbage, and I would renew my recommendation of last year, that places be provided for this object for the villages of Mystic and Pawcatuck.

The sanitary condition of the school houses of the town is excellent, and I would wish to commend the care given to this feature in the building of the new school house at Pawcatuck. The lighting, heating and sanitation of this building is unsurpassed. The sanitary condition of the other public buildings of the town is also good. From my knowledge of the sources of the supply of water and ice, I consider them good and free from contamination.

I do not know that the dairymen of the town have taken precautions beyond their customary practice of the past, to protect the purity of their milk. The intelligence and character of this class of our citizens is our only safeguard. No evidence of disease induced from this cause has come to my knowledge.

STRATFORD—DR. G. F. LEWIS, *Health Officer*.

One of the most important duties of the health officer is to prevent the spread of contagious diseases.

The record of the past year will show that quarantine regulations are effective.

The following contagious diseases have been reported, viz.: Measles, ten cases; scarlet fever, six; diphtheria, two; whooping cough, eight. No others have been reported. The type of scarlet fever has been mild, with no spreading of the disease.

The cause of the disease has probably been a case so mild as to go undetected. Only six complaints of nuisances have been made, all of which have been abated. The piling of muskels, and Tanner's Brook, are sources of complaint annually. The only way to prevent this annual nuisance of Tanner Brook is by adopting a sewer system in the town.

But this the citizens of the town refused to do at a town meeting called for that purpose. Keeping the brook free, and the channel dug out so that the water will run off and not become stagnant, is the only temporary relief that can be afforded. This the selectmen have done every summer at the suggestion of the health officer.

The bringing of carloads of manure into the town, to be unloaded, and carted through the town during the hot months, has been a source of annoyance, and a nuisance, to a large portion of the people living in the center. This matter has been regulated in the neighboring towns, and some similar regulations will be adopted in this town before another summer.

The sanitary condition of our school houses and public buildings is good.

The milk supply is excellent, no other sanitary precautions being taken than those suggested by cleanliness and common sense.

In other matters, in relation to the health of the town, there has been no change since my last report.

SUFFIELD—DR. J. K. MASON, *Health Officer*.

Measles—About the 20th of November last, a family moved into West Suffield from Southampton, Mass. This family with their children had been exposed to measles, which was prevalent there before they left, but as no case had developed in the family, nothing was thought of this exposure and their children immediately entered the Sheldon Street School. Not long after they began to cough, but as usual in such cases it was thought

to be "only a cold," and the result was that sixteen out of twenty-three scholars in that school came down with the disease all at once, and the school had to be closed. I was notified of the circumstances by School Superintendent Spencer, much to my surprise, for I had not heard of a case in town for months. Upon investigation I found that eleven families in the district had one or more cases, and the following week the Center District of the same society had to close its school, as the teacher had caught the disease from her Sabbath school scholars, coming from the Sheldon Street School before it was known that they had anything but "colds." Thus in these two districts—a large section of the town—the disease seemed to have stolen a march on us, and had got under such headway that there seemed no way of arresting it, as we always hope to do in the early stages of a contagious disease. To quarantine so many families for several weeks, seemed arbitrary and unjustifiable; especially as many people—heads of families—regarded the disease as of little consequence, and preferred that their children should have it in childhood and "done with it." However, despite these obstacles, something was done to restrict it and protect the community, by a liberal use of placards now authorized by statute and furnished and recommended by the State Board of Health. No less than 90 of these were used, applied to at least 200 cases. No doubt many elderly people, as well as families, illy prepared for such a visitation, were kept from it in this way. But the most remarkable thing connected with this great epidemic was the fact that not a single death occurred from it in the whole town. This, we think, cannot be said of any other town in the State where the disease prevailed even moderately.

Diphtheria—About a dozen cases have been reported during the year; with one death in East street. This occurred in a child ten or twelve months old, and the disease was thought to have been brought from Thompsonville, across the river, where the funeral was held, and the child buried the same day. Afterwards the house was fumigated and thoroughly cleansed, and no other case occurred in the neighborhood. The other cases were mostly mild and seem to require no special mention.

Scarlet fever—Only eight cases reported, and these mostly mild; none fatal. In one instance a family had recently returned from a visit to friends in New Jersey, and while there

it was known that a few cases were placarded on their street. Within two weeks after their return, their youngest child had symptoms of the disease, and was immediately isolated in an upper room and practically quarantined. A second case occurred in the family and that was the end of it, although three other families were domiciled in the same building.

Typhoid fever—Eleven cases reported; one fatal. This latter, by far the most important, occurred in a man 43 years of age; a lawyer by profession, having an office in Hartford. It was regarded and treated as malaria for a couple of weeks, and then typhoid fever symptoms began to be recognized; the patient dying twenty days after. The origin of the disease was not discovered and no other member of the family took it. Seven other cases occurred in two families occupying the same tenement, which had been vacant for two or three years. Whether the disease was contracted in that building or brought there, we cannot positively say, as the lower rooms and basement had been thoroughly cleansed and renovated for their joint occupancy. Moreover the first symptoms appeared very shortly after their arrival, which would seem to make rather a short period of incubation. All made good recovery, without any dissemination beyond the building. Three other cases occurred in West Suffield, one of which was sent to the Springfield Hospital.

Consumption—But few cases. Do not know that bad milk was suspected in any of them. Nothing has been done to restrict its prevalence.

Nuisances—Six complaints have been made, and all promptly abated, and as many more without complaint.

The school houses and other public buildings have all been inspected and found to be in good condition. During the vacation just passed, all the school rooms in every district were thoroughly cleansed with carbolic acid and other antiseptic washes, together with a liberal use of paint, varnish and cal-cimining.

The water supply from the town reservoir has proved to be abundant, pure and wholesome. No greater blessing has been conferred upon the town during the nineteenth century—let us see what the twentieth will do.

Ice ponds—Have examined all of these and found them well located and free from contamination.

Milk—Have heard of no change in regard to “milk precautions” on the part of the dairymen; probably should if any had been made. All regard the milk question as a very important one.

Of late much attention has been paid to road-making, and although this cannot be regarded as a strictly sanitary work, still we all know that clean, well-kept streets in a city are thought to contribute much to its healthfulness. If this be so in the city, why not in the country?

THOMASTON—DR. THEO. ST. JOHN, *Health Officer*.

Measles have prevailed to a great extent, but caused but one death. There were two hundred and eighty-two cases; scarlet fever, one; diphtheria, one; whooping cough, one; typhoid fever, five.

Thirteen cases of nuisance have been abated; five without complaint.

Some of the streets have sewers running to the Naugatuck river, others use cesspools, some sewer into the Pease swamp, still others sewer into what is called Duck Creek; among them, and the worst, is the sewer that comes from the Town Hall and the fire companies' water closets.

Contagious diseases are quarantined and cared for in the house where the disease occurs.

Our school houses and other public buildings are in a good sanitary condition.

Our water supply is from a reservoir located in the town of Plymouth, also from wells and a number of springs on the side hills above the town.

As there does not seem to be any law authorizing the health officer to inspect the various dairy stables or health of the cows, or inspection of milk that is brought into town, therefore, I have no certain knowledge of their condition. I stopped one dairyman from peddling milk while a member of his family was sick with typhoid fever, and for one month afterwards.

THOMPSON—DR. LOWELL HOLBROOK, *Health Officer*.

Measles prevailed epidemically in the early part of the year, without serious complications.

Scarlet fever—Only four cases reported during the year, and it is gratifying to know that in no instance was the disease

communicated to other families in the vicinity of those in which it originated, which would seem to imply the efficiency of the preventive measures of isolation and disinfection employed.

Whooping cough was prevalent during the early part of the year, but no cases were reported.

Only one case of typhoid fever was reported, and that of a mild type.

It seems difficult to arouse in the public mind interest in the contagiousness of tuberculosis.

Nuisances—There has been four complaints, and four abated.

Much attention is paid to removal of garbage, and proper systematic sewerage, by well-constructed drains.

The sanitary condition of school houses is not good, by reason of faulty methods of heating and ventilation; other public buildings generally good.

Ice ponds—None known to be objectionable.

I think no special attention is bestowed in the matter of securing the best results in the purity of milk, but I have no personal knowledge in these respects.

TOLLAND—EDWIN S. AGARD, ESQ., *Health Officer*.

There were twenty cases of measles reported and investigated during the year. The children were exposed in the first instance by a scholar coming down with the disease while at school, in District No. 1. This scholar had lately come into the school from Stafford Springs and probably brought the disease with her.

There were four cases of whooping cough.

One nuisance was reported and abated.

The sanitary condition of our school houses, generally speaking, is good.

The water supply is good.

The ice harvested is mostly from private ponds, the water of which is pure.

The sanitary condition of the town at present is good.

TOWN AND BOROUGH OF TORRINGTON—DR. ELIAS PRATT,
Health Officer.

There have been a large number of cases of measles reported, the disease becoming epidemic during December, January,

February and March. To show that this is a serious disease, I need only say that during those months there were nine deaths from measles, and nineteen deaths from pneumonia and bronchitis, which diseases frequently complicate measles. With the above facts before us, it becomes the duty of every one to report at once the early cases to the officer, and to coöperate with him in preventing other cases.

There have been seven cases of scarlet fever reported.

Diphtheria was present seven months of the year, there being nineteen cases reported.

There have been seven cases of whooping cough reported.

Ten cases of typhoid fever have been reported. This is a disease due to contamination of drinking water with the typhoid germ. The drinking water most often contaminated is well water. People living in the borough should avoid drinking well water, and those living away from the public water supply should use great care in preventing their wells from being contaminated.

The number of complaints of nuisances has been few in the town, and those have been abated.

The sanitary condition of school houses is good.

Water supply is from public water supply and from wells.

Ice ponds have not been examined.

Your health officer would make the following recommendations: That some method be adopted for the disposal of garbage; that the use of privies be discontinued where there is a public sewer, and that there be some supervision of the milk supply.

TRUMBULL—E. S. FAIRCHILD, ESQ., *Health Officer.*

The following contagious diseases have been reported: Scarlet fever, four cases; measles, fifty-six, and typhoid fever, two. No others have been reported.

There is no doubt that many cases of measles occur where a physician is not called and cases are rarely reported by parents, but a few cases have so been reported and it is the duty of parents to report contagious diseases when they do not call a physician. During the month of April measles were epidemic in town.

The type of scarlet fever has been mild.

Six complaints of nuisances have been made. There were two cases of cesspools and four of dead animals. Proper care should be taken in cases of dead animals to see that they are properly buried. The old way of drawing them off in the woods or an unused lot should be abandoned.

Typhoid fever: one was the rundown state of the patient, and drinking bad water the other. The patient came into town with the fever.

Great care should be exercised in regard to drinking water from low wells and springs and all wells that are low should be cleaned out this dry season.

The sanitary condition of the school houses is good. All have been cleaned and two repainted during vacation. The condition of the other public buildings is good.

Some towns are agitating the subject of milk supply. In a country town like this, where the milk is supplied by our own people, there seems to be no need of any official supervision of the milk, which is at present excellent.

UNION—E. W. UPHAM, Esq., *Health Officer*.

There has been, I think, sixteen cases of measles the past year, with no deaths; two cases of membranous croup, with two deaths. No other cases of contagious disease reported.

One case of nuisance reported and abated.

The school houses are in fair condition.

The water supply is mostly from wells.

VERNON—DR. A. R. GOODRICH, *Health Officer*.

I have to report that the town has been fairly exempt from most of the contagious and infectious diseases during the past year.

Measles were imported into the County Home by a child from a neighboring town committed to that institution, infecting nearly all the children and attendants to the number of thirty-five out of fifty in all. Some of the cases were severe, most of them of light character, but the capacity of the hospital was strained to its utmost, three and four occupying the same bed. Two deaths resulting from secondary causes; one from pneumonia; the other from acute Bright's disease; this one was placed in the hospital in Hartford, where it died.

As soon as the first case developed, it was reported to me. I immediately quarantined the institution, removing the children from the public schools, forbidding the attendance at church, and allowed no one to enter upon the grounds of the institution. In other words, a strict quarantine was established with the best results. Thus it will be seen that by promptly reporting the first case by the physician prevented the spreading of the disease outside the institution.

Cholera infantum of a severe character prevailed during the months of July and August. Some fourteen fatal cases resulted from that disease alone, caused in my opinion from improper food in a majority of cases.

Parents should exercise the greatest caution in preparing food for children who are fed from the bottle. To see that the bottles and tubes* are properly sterilized after feeding, and that the milk has not been exposed to microbes of any kind, as there is no one article of food so easily infected as milk. The germs of typhoid fever, diphtheria and scarlet fever, are more easily absorbed in milk than any one other article of food, and thus conveyed into the system, there to accomplish their deathly work.

Nothing has been done in the way of preventing the spread of pulmonary consumption. Persons with consumptive tendencies continue to walk our streets, expectorating upon the sidewalks, which soon dries, and then the long skirts sweep over the walks filling the air with dust and microbes, to become inhaled by those who may chance to follow, filling the lungs of those who have not the power to expel them; which in time (as a natural consequence) is developed into consumption.

It has been fully demonstrated under the microscope, that microbes have been found attached to these long dresses, which fully explains the manner in which many diseases so mysteriously appear in our midst from causes to us unknown. It is a serious question in which we are all concerned, and when facts are presented and fully demonstrated by science, and the means placed in our hands, we should not hesitate in combating by municipal as well as hygienic law the spreading of these diseases.

* It is impossible to sterilize nursing tubes by domestic methods. Their use is prohibited by law in some cities, and ought to be everywhere.—C. A. L.

Consumption is a preventable disease and the time is not far distant when it will be as strictly quarantined as many other contagious diseases are at the present time.

Ten formal complaints have been made during the past year, which were abated, and six where no complaints were made. Only one case has been referred to the County Health Officer for adjustment.

The bone and fat-boiling establishment near the trolley and highway leading to Rockville, which has so long been a nuisance to the traveling public, has at last been abated by orders from the County Health Officer, without prosecution, who declared it a public nuisance and operating without a license.

The supply of milk the same as in former years, by milk peddlers. The cleanliness and ventilation of stables can be improved. Clear water in abundance should at all times be furnished to all stock in confinement.

I hope the time is not far distant when the producing and delivery of milk to the public will come under the inspection of commissioners appointed for that purpose.

Our school houses have been inspected twice during the year, and thoroughly cleaned, disinfected, painted, and placed in the best sanitary condition.

After the severe epidemic of measles at the County Home, which taxed the old building to its utmost capacity, a new home is being built for the accommodation of seventy-five or more boys and girls, with the best sanitary arrangements possible. When the old buildings are removed, it will be one of beauty as well as one of usefulness to the rapidly increasing occupants finding their way there from all over the county.

The hospital arrangements are ample for all future demands, situated in the upper part of the building on the south and west sides, for the admission of sunlight and air; and when abundance of water is introduced for culinary as well as fire protection, it will be a model institution. The expense of building will be some fourteen thousand dollars.

The supply of ice is from ponds supplied by springs from our granite hills, and is of superior quality with the exception of one which is of doubtful character, but which is used principally for cold storage and refrigerators.

VOLUNTOWN—DR. W. R. DAVIS, *Health Officer*.

The health of the town has been exceptionally good. There were a few cases of measles, of a mild type; one death occurred, however. No other cases of infectious disease have been reported.

There were two cases of nuisance reported, and these were promptly attended to. Very few families are tidy—while many others are careless, and get rid of it the easiest way.

The disposal of sewage is mostly by private drains and cess-pools, or on the top of the ground.

The sanitary condition of the school houses is very good indeed.

The water supply of the town is mostly from wells and cisterns, and is good, although the extreme drought the past summer has rendered some of them poor.

The ice used is obtained from ponds in and around the town, of which I have made no inspection.

I think our milk is good. I do not know that there are any extra precautions taken to protect the purity of the milk. As regards the methods of milking, cooling, ventilation, care of stables, cleanliness of the utensils used, I know nothing about them.

WALLINGFORD—DR. WILLIAM P. WILSON, *Health Officer*.

There were two outbreaks of measles, the first occurring in December, 1899, at Rosemary Hall among the students, and was brought by them from New York State. The number of cases was limited to five, due to the prompt and thorough manner in which isolation and disinfection were carried out, with the hearty coöperation of the supervisors of the school. The next outbreak occurred during the early part of June and quickly became epidemic, the number of cases running up into the hundreds. This epidemic was confined principally to the north-eastern part of the town and borough; the disease seeming to make its way into the town by way of Meriden, as very few cases occurred in other parts of the town.

Scarlet fever we have had with us for eighteen months, due, no doubt, to the fact of mild cases, where no doctor was employed, not being reported to the health officer. I have good reason to think that the disease started in the Whittlesey Ave.

School, in Room No. 3, as a great many of the cases were found to be among scholars from that room. There has not been one case of scarlet fever in the town since the school closed for vacation. The whole number of cases reported was twenty-five, as compared with seventeen the year before last. All the cases terminated in recovery.

I have requested the coöperation of the teachers in the schools, to stamp out scarlet fever and diphtheria; first by reporting any suspicious cases of sore throat, also by requiring a note from the attending physician in all cases where any member of the family is ill with sore throat from any cause; also when any member of the family is confined at home with sore throat, no other member should be allowed to attend school till we are certain of the nature of the disease.

Diphtheria has been confined to one family, on Valley street, near the terminus of the Valley street sewer. The children were in the habit of wading in the brook into which the sewer empties, and I think in that way contracted the disease, by getting the germs on their hands and clothing. This brook, into which the sewer drains, at times of heavy rains overflows a large piece of marshland, thus depositing thereon filth and any germs of disease contained in the sewage. This nuisance was ordered abated by the health officer over a year ago, but no attention was paid to the order by the borough authorities until I reported the matter to the County Health Officer. They then ordered some of the filth scraped out of the brook, and left the place practically as bad, or worse than before, for they stirred up all the germs that were buried in the bed of the stream. I don't know why this nuisance has not been abated, as I left the matter in the hands of the County Health Officer.

Whooping cough is epidemic here at the present time.

The number of cases of typhoid fever was seven, scarcely more than half the number reported the year before last. All cases were of a mild type.

There is no doubt in my mind but that there have been many violations of the health officer's regulations regarding quarantine, such as people visiting families where there are cases of contagious disease, and conveying the disease to others; and in some cases, even members of the family where a contagious disease is prevalent going about among the public.

The number of complaints of nuisances during the past year was twenty-seven. Twenty-three were abated after sending notice, the other four by request.

Garbage disposal consists, in most cases, of making an unsightly heap in the back yard, mixing swill and ashes together in one pile, which is little better than a compost heap, and a nuisance to the neighborhood. In some cases, especially in the tenement districts, this refuse is allowed to stand for a year or longer, unless a complaint is made of it to the health officer. As the center of the borough is becoming very thickly populated, some more systematic way of disposing of garbage would seem to be a necessity. The cost to the taxpayers of having the garbage disposed of by the borough, at regular intervals, as is done in cities, would be less than it costs them to attend to it individually. The teams used for this purpose could also be used for other public work. A system of collecting and disposing of garbage by the borough, would also necessitate the use of a proper dumping ground instead of the present method of each person carting it from his premises to a convenient place, where it may still be a nuisance.

The method of sewage disposal in the borough is principally by sewers, but there is a great need of more sewers, as the present number is insufficient to meet the needs of the public. There has been very little sewer building during the past year.

The sanitary condition of the borough schools is good, but in the outlying district schools the privy vaults are not properly ventilated in any case. The district committees have been notified of this defect, and how it should be remedied.

The sanitary condition of all the public buildings is good.

Our water supply is as pure and wholesome as possible. There is no chance for contamination, as no streams empty into the pond, which consists of spring water.

Our ice supply is obtained from good clean ponds in all cases. One pond was condemned for domestic purposes during the past year. I don't know that it has been put in proper condition since.

I have no knowledge of the methods of caring for dairy products in the town. I think that there should be a strict supervision of all dairies, the cattle and all dairy products. I also think that the State should furnish all necessary information

in regard to the care of cattle, the proper construction of stables, care of all utensils, method of milking, and care of dairy products, to all dairymen. The importance of pure milk to the public health, especially to children, justifies these measures.

All plumbers, I believe, are obliged to have a license before they are allowed contracts in the borough, to lay drains, etc. This is a step in the right direction, but I think we should go further and pass some ordinances compelling owners of buildings to properly trap all sinks, water closets, and drains into sewers and cesspools, so that the gas from the cesspools and sewers will not ascend through the sink pipes, as it does now, in many cases.

WARREN—WILLIAM FORESTELLE, ESQ., *Health Officer.*

Measles began in April, followed by a great many cases. I took steps to prevent its spreading and had good success.

I was notified of a case of diphtheria, and I at once quarantined them for three weeks, and paid attention to it for the time, and therefore had no other case of it. The case was a child visiting from Brooklyn, N. Y. After the three weeks were up I fumigated the house thoroughly.

I was notified of a case of scarlet fever; I then quarantined them and had no other case.

WASHINGTON—DR. R. MARCY, *Health Officer.*

There were reported of scarlet fever three cases, and of whooping cough, sixty cases.

No efforts are being made to restrict the prevalence of pulmonary consumption.

Nuisances—Number abated, seven; number abated without complaint, six.

In the methods of garbage disposal and results there is no improvement in past year.

Sanitary condition of school houses and other public buildings very good.

Ice ponds—Number examined, three; condemned, none.

Milk—Dairymen do not take any precautions beyond the customary practice of the past to protect the purity of their milk.

No public sanitary works undertaken.

CITY OF WATERBURY—DR. C. W. S. FROST, *Health Officer*.

Of the diseases especially prevalent during the past year measles easily takes the lead, being epidemic during the months of February, March and April, with 451 cases out of a total of 518 for the year. The deaths numbered 13, ten of which occurred in March. The disease was generally of a very mild type, death being caused by complications, mostly bronchitis and pneumonia.

Scarlet fever occurred during every month; total, 47. The deaths, including those from 30 cases occurring in the town, numbered nine.

Diphtheria was reported every month excepting August; total, 54. Deaths, including those from 10 cases in the town, numbered seven.

The number of cases of whooping cough is difficult to determine, as in a large number of cases no physician is consulted, and physicians themselves are negligent in regard to reporting this disease, notwithstanding that the necessity for so doing has been repeatedly called to their attention. There were sixteen cases reported, and three deaths registered.

Typhoid fever was reported in 1899, Sept. 14, Oct. 13, Nov. 2, Dec. 1; 1900, Jan. 1, Feb. 1, March 1, June 2, July 8, making 78 cases altogether, with 20 deaths.

Although a large number of cases were carefully investigated in regard to their origin, no special cause could be found. A number of these cases were brought to the Waterbury Hospital from nearby towns.

Cerebro-spinal fever—Two cases; one death. One of these cases was in the town.

We have an anti-spitting ordinance in and around public buildings, street cars, etc., which has proved to have a good effect in restricting consumption.

Three years since, the writer called the attention of the city government to the advisability of an ordinance in regard to the reporting of all cases of tuberculosis, and the care of and disinfection of the premises where the disease had existed.

The sanitary inspector's report for the year embraces:

Houses placarded—Scarlet fever, 47; diphtheria, 54.

Nuisances—Inspection of water closets, 93; sink pipes, 141; surface drains, 31; surface closets, 530; cesspools, 27; stables, 62; yards, 1,779.

Garbage complaints—56.

Ordered cleaned—Surface closets, 113; cesspools, 10; stables, 37; yards, 989.

Ordered abolished—Surface closets, 137; cesspools, 12; surface drains, 18.

Dead animals removed—Dogs, 9; cats, 20; horses, 1.

The garbage is collected and buried pending the completion of the Crematory. After January 1st, 1901, the garbage will be cremated, a five-year contract having been awarded for that purpose, to H. M. Rigney of Waterville. The crematory will dispose of all garbage and offal, dead animals, night soil, and waste material from grocery stores and markets. It will thus do away with the necessity for a public dumping ground.

There has been a general extension of the sewers during the year. The city has under consideration plans for its disposal, being obliged to abandon the present method, that of sewerage into the Naugatuck River. This will be accomplished at far greater expense than if steps had been taken earlier, when suitable land was available near the city, which fact was called attention to and recommended in the report of the writer in 1887.

There have been no cases removed to the Contagious Disease Hospital during the year. The hospital is fully equipped, and ready at all times for the reception of patients.

The sanitary condition of the school houses is excellent. Improvements recommended in the Crosby Grammar and Elm Street buildings have been made during the year.

We have a splendid water supply in the Branch Reservoir, which has never as yet failed, though owing to the rapidly increasing demands from the splendid growth of population, there is a likelihood, in the near future, of the raising of the dam by fifteen feet, which will double its capacity and furnish a never-failing supply of pure water.

The ordinance regulating the sale of milk in the city has resulted in great improvements; the dairies, herds, and utensils being regularly inspected by our milk inspector, or P. T. Keeley, who is an experienced veterinarian, whose report is here appended:

INSPECTIONS OF DAIRIES.

Cow sheds	399
Barn yards	399
Water	396
Feed	399
Cans	1618
Milk coolers	379
Stables ventilated	403

ORDERED CLEANED.

Barn yards	43
Stables	15
Milk cans removed from barn.....	0
Stables ordered whitewashed	42
Milk coolers ordered cleaned.....	10
Cans ordered cleaned	14

INSPECTION OF STORES AND VEHICLES.

Stores inspected	332
Vehicles inspected	184
Cans removed	2
Measures ordered cleaned	16

ORDERED ABOLISHED.

Wells	0
Cans	2

EXAMINATION OF MILK.

Number of samples of milk examined	454
Number standard	437
Number below standard	17

TOWN OF WATERBURY—DR. B. A. O'HARA, *Health Officer*.

The districts of Waterbury lying outside the city limits and under the jurisdiction of the town health officer, have enjoyed comparative freedom from fatal epidemics during the past year.

Measles—One hundred and thirty cases were reported. While these cases were distributed over the entire town outside the city, the greatest number occurred in the village of Waterville. The disease raged here to such an extent that the Waterville school of six rooms was closed for two weeks, even two of the teachers contracting the malady. Before the school was again opened, the building was thoroughly fumigated and all the water closets disinfected. In every case reported, the dwelling was placarded, and on recovery each patient was examined before being granted a permit to attend school.

Fifty-two cases occurred in this village during the month of March. There were many more cases of a mild form in other parts of the town that were not reported. Those mild cases are just as contagious as severer cases, and parents and others who hide them or fail to report them are guilty of criminal negligence.

Scarlet fever has been somewhat prevalent in our town districts; thirty-two cases have occurred, none fatal. These cases were not confined to any particular locality and the causes have been ascribed to infection from city victims. Scarlet fever contagion is very tenacious of vitality and is easily conveyed in clothing and other things. The scarlet fever cases of the town districts were strictly quarantined to the necessary inconvenience and distress of the victims, but to the eventful welfare of the communities. Many protests by the afflicted ones were made and comparisons with the freedom from quarantine which residents of the city enjoyed seem to make their burden harder to bear. But the fulfillment of the letter of the law, in these cases, I believe, was the means of stamping out the disease when it appeared at one time very ominous.

Twelve cases of diphtheria, scattered over the town, were treated in the same manner as the scarlet fever cases. Two cases of diphtheria resulted in death. Some cases had become infected through contact with friends from the city.

Two cases of whooping cough were reported; there must have been many other cases not reported.

Sixteen cases of typhoid fever were reported; these were well scattered.

The hospital which the city and town in conjunction have provided for grave contagious diseases has not been used since its construction four years ago.

Ten sinkwater and eight water closet nuisances were abated. Leonard Street seems to be the locality from which most of the complaints of these nuisances have come.

Our method of sewage disposal in the town districts, with the exception of a portion of Watertown road and Waterville, which sewer into the reprehensible Naugatuck, is confined to cesspools and the real genuine aboriginal.

The garbage disposal by the city still continues to be a matter of concern, but we expect soon to be easy on that score, as

the city has contracted to have its garbage cremated after January, 1901. Thus will go up in smoke a great nuisance that has tormented the town for many years.

There are thirteen school buildings containing twenty-six rooms in the town districts. The sanitary condition of these schools is excellent, each one of the twenty-six rooms having been thoroughly cleaned and fumigated and the water closets disinfected during the summer vacation. The opening of the schools in September finds them in as good condition as it is possible to make them. The ventilation of the school buildings, with the exception of Town Plot School, is the old method, through the windows, which by the way, with a careful teacher, is much better than some of the expensive methods in use in the city.

Simonsville is the only section of the town that is supplied with city water. The school there, whose water supply was condemned sometime ago, is now furnished with water from the city. All other sections of the town secure their water from springs and wells. Many of these districts, especially Waterville, are becoming so thickly settled that it will soon become incumbent on the residents there to seek some other source of supply.

The slaughter house of A. B. Pierpont and the piggery of A. J. Pierpont, East Farms, were so persistently kept in such filthy condition, that after repeated notices, the County Health Officer exercised his legitimate functions and the slaughter and the piggery have been abolished.

There now remains but one slaughter house in the town, that of Valentine Bohl, which with his fat refinery establishment he conducts in accordance with scientific principles with the very latest equipments.

The fat refining plant of the Pelletier Brothers on the Wolcott Road, though small, is mighty, and requires the constant oversight of the health officer. These people have been more careful in the observance of the law during the past year than in previous seasons.

The piggeries on Town Farm Road, Waterville, Wolcott Road, and Prospect Road, have been under careful inspection. Those in East Farms and South Brooklyn have been abolished.

The dumping of rubbish on the town roads has given little trouble this year compared to previous years. Occasionally some

culprit is apprehended in trying to dispose of his rubbish or night soil by dumping it on the roadside. These fellows are discovering that the eventual expense is greater when they violate the law.

I have carefully inspected the source of supply of the thirteen ice ponds of Waterbury, from which ice is taken for commercial purposes, and ordered such sources of pollution as existed to be removed.

WATERTOWN—DR. W. S. MUNGER, *Health Officer*.

Of measles there have been fifty-four cases reported. These cases have occurred in all parts of the town, and have been of almost all grades of severity, and as there were many cases of German measles, so called, and in many no physician was called, the exact number is not known. Where and how they originated it was often impossible to tell, many times, without doubt, imported from other towns. At first much care was taken to prevent its spread, but later it seemed impossible to effect much by way of prevention.

Of scarlet fever there were twelve cases reported. Most, if not all of these cases, originated out of town or on the cars, and in all cases great care was taken to prevent the spread of the disease.

Of typhoid fever there have been fifteen cases reported, of which two have died; six in one family. With the exception of those cases occurring in the same house, I could not learn that one could be connected by contagion with another. I think the doctors have used due care to prevent the spread of the disease.

Of cerebro-spinal fever there has been one case, which proved fatal.

Of la grippe there have been quite a large number of cases, but as they were not reported, I cannot tell how many.

Of malarial cases there have been more, I think, than usual; some of them easily controlled, but some of them of the type which half a century ago would have been denominated "bilious fever," a few of them lasting several weeks, exhausting the patience of the patients and the physician.

Of nuisances there have been but few cases, of which complaint has been made, and those settled by a little advice or suggestion.

The sanitary condition of the school houses and other public buildings is, I think, very good.

Concerning the water supply I am pleased to be able to report that water is now being brought from the town of Bethlehem, and it is hoped and expected that it will be a perfect success.

As to the ice ponds, I would say that one was examined last fall, and advice given that the ice should not be used for drinking and culinary purposes, which advice I think was followed. The other ponds, I think, are in good condition.

WEST HARTFORD—F. H. STADTMUELLER, ESQ., *Health Officer*.

During the year ending August 31st, 1900, one hundred and thirty-nine cases required attention or inspection by the health officer. Numerous other cases were disposed of through correspondence. These demands are most gratifying in so far as they indicate the growth of public opinion regarding the importance of sanitation.

Whenever contagious or infectious diseases prevailed, particular attention was directed to establish the source of infection. Twenty-nine cases were reported, classified as follows:

Measles—Five cases; one case was contracted in another state. This case may have accounted for three cases that followed, but the evidence was doubtful. The remaining case was contracted in another town where the patient was visiting while measles were prevalent.

Scarlet fever—Three cases; these were sporadic and inquiry failed to establish the source of infection.

Diphtheria—Eleven cases; all sporadic. No satisfactory source of infection could be ascertained. Diphtheria was unusually prevalent in Hartford, and the proximity of this town and attendant frequent intercourse may have accounted for some of the cases.

Whooping cough—No cases were reported, although the disease prevailed, but no certainty obtained concerning the frequency of its occurrence.

Typhoid fever—Ten cases. Five of these were sporadic and the source of infection was not discovered. The sixth case was

contracted in Hartford. The remaining four cases occurred at one house. The first of these preceded the other three cases by two or three weeks. The primary case was probably contracted beyond the State, as the patient was taken sick one and one-half days after arriving here. A week elapsed ere medical aid was summoned, and upon diagnosis of typhoid the patient was removed to the hospital. The absence of typhoid at these premises prior to this case suggests that it created the infective center for the remaining three cases. The water used appeared reasonably free from pollution, but as careful investigation led to the exclusion of all other sources of infection, the water was subjected to careful analysis. The chemical test proved the water to be of good quality, while the bacteriological analysis showed pollution.

The occurrence of pulmonary consumption, a contagious disease, is not required to be reported. Hence it is impossible to officially exercise any efforts towards the control of the disease, other than such as may be or are suggested by attending physicians.

Ninety-nine nuisances required attention, most of which were brought to notice by formal complaint. Thirty-eight of these were directed against the transportation and use of garbage from Hartford, designed for hog and poultry feeding. This practice has been of slow growth, and had finally obtained such dimensions as to become an intolerable nuisance. Efforts had been made in past years to regulate and control this traffic, but all suggestions and directions were ignored shortly after their promulgation. It was therefore decided that the only way to effectually protect the public in its rights was to stop the practice. To this end Rule XXI* was adopted, posted and advertised according to law; a copy was also given to each individual known to be using city garbage. Strenuous efforts have been and are being made to enforce this rule. It has been difficult

* **RULE XXI.**—No person will be allowed, and all persons are forbidden, to bring into this town, or to have in this town, garbage from the city of Hartford, whether the same may have been collected or received from any of the garbage wagons or collectors of garbage in said city, or whether it may have been collected or received by any person directly from any private house, boarding house, restaurant, market or hotel.

to obtain proper evidence of violations. Two successful prosecutions were made against violations of this rule, both of which had been preceded by due warning to abstain from any further violation. The remaining sixty-one nuisances were abated, excepting a few in process of abatement.

The removal of garbage from the more populous portions of the town will soon require attention, and measures should be adopted for its systematic collection and disposal.

The projected sewer system for the Center is, unfortunately, still in abeyance. This very necessary work is delayed pending the solution of the final disposition of the sewage. The Sewer Commissioners are indefatigable in their zeal and efforts to attain a proper solution of this perplexing problem, and it is confidently expected this important work will be successfully executed within the next year. Sewers are also demanded for the section north and south of Park street and west from the city line to Whiting street. The Sewer Commissioners also have this work under consideration.

There are now seven school houses in use. The sanitary arrangements of three of these are good, while the condition of the others is such as is to be expected from their physical surroundings and equipment.

The economic importance of milk* demands a review of the progress made in its production. It is gratifying to observe the precautions which have been adopted beyond the customary practices of the past. These improvements embrace greater care in milking, cooling and aeration of the milk, improved ventilation of stables and better health of the animals. At one of the milk farms a bacteriological laboratory is maintained to establish the daily bacterial infection of the milk produced. Milk has been made there for the past year which had an average infection of less than 5,000 bacteria per c.c. of milk. While the amelioration of milk production is not as general as might be desired, it is possibly, nevertheless, being introduced as rapidly as the public will approve. The value of a pure milk, measured by both the ordinary and hygienic standards of purity, is not sufficiently understood or appreciated by the people.

* Written by request of the Secretary of the State Board of Health.

WEST HAVEN—DR. CHARLES A. BEVAN, *Health Officer*.

This is the first year in which the Borough Health Officer's report has appeared separately, as required by law, it having heretofore been published with the town report.

Cases of contagious diseases reported in 1899: measles, eleven; scarlet fever, six; diphtheria, four; typhoid fever, six, and membranous croup, four.

We have just passed another year free from epidemics. There is a cause for thankfulness that so few have been called to mourn the loss of our loved ones from this cause, only 27 cases of infectious disease having been reported, with only two deaths. All cases have been promptly reported by the physicians in charge and in this way have very materially aided the health officer in checking any tendency towards the spread of contagion. Some persons still object to the posting of the placard on the outside of the house. The health officer has no discretion in this matter, but is required by a rule adopted by the health officers of the State, to post the placard on the outside of the house in plain view, where it can be seen by people passing on the street or entering the house.

Measles—Eleven cases have been reported during the year, while probably a good many more undoubtedly existed which were not reported. All cases should be reported whether attended by a physician or not, so that the health officer may keep an accurate record of all cases occurring in the borough.

Scarlet fever—There have been six cases reported, with no deaths, which is very gratifying, considering the gravity of this disease.

Diphtheria—Four cases is a very good record indeed, only one resulting fatally, not from the disease itself but from complications following.

Typhoid fever—Six cases have been reported, with one death. The increasing prevalence of this disease in our borough should cause us to again look into our drainage system, especially as typhoid fever is no respecter of persons, but may attack all classes, high or low, rich or poor.

Nuisances—The abatement of nuisances is becoming a very serious problem. As our borough increases in population (and it is growing rapidly) complaints of this nature increase with it, and at a much greater ratio; so much so that during the

summer months the health officer has at times more than he can attend to, with his other duties. Consequently some complaints have not always received the attention they deserved. But the public generally have shown the appreciation of the efforts of the health officer by their hearty coöperation.

Methods of sewage and garbage disposal—While we are moving along in the same old rut, we have marked one step forward the past year in the appointment of a committee to investigate and report on this subject, but the step was so short as to be barely perceptible. A committee was appointed at our annual meeting to investigate the matter and report at some future meeting. They attended to the duty assigned them faithfully, and with some loss of time and money to themselves, but were finally unable to agree unanimously upon a report. Two reports were, therefore, submitted and the matter was indefinitely postponed by the citizens. It is a cause for regret that this committee could not agree on a unanimous report, but it is a still greater cause for regret that the citizens disposed of the matter with such scant consideration, for it is a subject of the greatest importance for this borough, and is growing more so every year. This committee were at least entitled to the thanks of the public for their painstaking work, and also their discharge. In the thickly settled portions of our borough more complaints are received referring to the filthy condition of privy vaults than from any other source, and certainly nothing is more vile and offensive. It is inconceivable why we allow such things to exist. This work should be taken up at once in earnest and with sufficient vigor to insure some results. Let us be foremost instead of hindmost in the work of sanitation with other cities and boroughs of our State.

Water supply—We now have an abundant supply of water, taken from the reservoirs of the New Haven Water Company, which will insure us in the future plenty of good water for all purposes.

Milk supply—This is, in most part, supplied from the surrounding farms and is usually of excellent quality, for most of the producers have found that to successfully compete with other and larger dealers their product must be first-class in every particular. There is at present no law requiring the inspection of our sources of milk supply, but the health officer

has, on his own responsibility, inspected some of our dairies and found them well kept and excellently managed, care being taken that the water supply shall be pure and the food given of the best quality. The dairymen who think anything good enough for a cow to eat are fast passing away, and are now running their dairies purely as a commercial undertaking. This is a good augury for the future milk supply, and should receive every encouragement.

WESTON—DR. FRANK GORHAM, *Health Officer*.

There has been reported to the health officer the following contagious diseases: measles, five cases; diphtheria, two; scarlet fever, one; typhoid fever, two. All these cases terminated in recovery. None of the above cases were traced to previous cases, with the exception of measles, in which instance the patient first attacked contracted the disease in an adjoining town and communicated it to the others. In addition to the above there occurred about a dozen cases of German measles.

In regard to water supply, ice ponds, sewage and garbage disposal, sanitary condition of school houses, etc., we do not suffer by comparison with most other country towns.

WESTPORT—DR. L. T. DAY, *Health Officer*.

The following contagious diseases are reported: measles, eleven; scarlet fever, six; diphtheria and membranous croup, four; whooping cough, twenty; typhoid fever, four. The measles were distributed all over the town; the majority were traced to neighboring towns. The scarlet fever was all supposed to be contracted in a neighboring town. Only four cases of diphtheria, all in Saugatuck.

The two cases reported in September last represent the end of what might have been a serious epidemic, had not prompt quarantine measures been instituted. In speaking of this epidemic in his annual report to the State Board of Health, County Health Officer George E. Hill of Bridgeport says:

"The village of Saugatuck, in the town of Westport, furnished an illustration of the necessity at times for prompt and stringent restrictive measures. Not far from the station of the New York, New Haven & Hartford Railroad at Saugatuck, is a tenement house occupied by a considerable number of non-

English-speaking families with a large aggregate number of children. One of the children became ill with diphtheria, and was attended by a physician from a neighboring town. For some reason not fully understood the case was not reported with the promptness required by law, and the first knowledge which the health officer had of its existence was the filing with the Registrar of a certificate of the death of the child. Before the health officer reached the premises there had been a considerable gathering of the neighbors and an exposure of several at least of the children; in the meantime one or more cases had broken out in the same building. Quarantine of the exposed persons was immediately instituted by the health officer, but owing to ignorance or general indifference to the law, or both, several of the adults left the premises. At this stage I was called in by the local health officer to advise concerning the enforcement of quarantine and found a condition which seemed to me called for prompt and effective action. I caused an officer to be stationed to enforce the quarantine throughout the twenty-four hours, until such time as the danger of further outbreak was passed and disinfection had been made. Although there were eleven other cases among those originally exposed, the disease was confined to the immediate neighborhood of the primary case, and I believe no cases occurred which could not be traced to such exposure as took place before the arrival of the health officer.

"I deemed it necessary to prosecute the physician who had failed to report the original case. He pleaded guilty and paid a fine."

During the year thirteen nuisances have been abated on complaints.

In my last annual report, attention was called to the condition of the gutters on Main street. I am pleased to state that the condition has been remedied by grading and paving the gutters. The catch basin corner of Riverside and Burr avenues has also been reconstructed.

In regard to other topics, such as garbage disposal, care for contagious diseases, sanitary condition of public buildings, water supply, ice, and milk, there is no change from previous years. A regulation preventing the spitting upon the floor of street cars was put in force December 12, 1899. There were

fifty-one deaths, including four from consumption, and sixty-seven births. Death rate about thirteen per 1,000.

WETHERSFIELD—DR. EDWARD G. FOX, *Health Officer*.

No measles reported. There were six cases of scarlet fever, of a mild character. We had about twenty-five cases of whooping cough.

Typhoid fever—There were four cases; all were of a mild character.

I do not know of a case of consumption in Wethersfield at the present time.

The number of nuisances abated, three.

Garbage disposal—During the past few years it has been the practice of a large number of our farmers to bring garbage from Hartford to feed to hogs, etc. In June, 1900, a meeting of the health officers of the towns about Hartford was held at the office of County Health Officer Markham, and after discussing various phases of the garbage question it was decided it was a nuisance, and should be prohibited from being brought into the various towns. Accordingly I issued a notice to all that brought garbage into Wethersfield, that the practice should be discontinued at once. The larger proportion complied with the notice, but a few persisted in carting, and it was found necessary to prosecute five. At the present time I think none is brought into town.

The sanitary condition of our school houses and public buildings is very good.

The water supply is largely by wells, and is good.

Number of ice ponds examined was four, of which one was condemned.

As regards the milk supply, there has been a great improvement during the past few years. With one or two exceptions all our dairymen take more care in the cleanliness of cows and attendants, also ventilation and cleanliness of the stables is looked after more thoroughly than formerly. The milk is immediately removed from the stable to a clean room and at once cooled.

WILLIMANTIC—DR. A. J. CRIGHTON, *Health Officer*.

Willimantic has been remarkably free from contagious and infectious diseases, there having been reported six of measles,

five of diphtheria and croup, twelve of whooping cough, and three cases of typhoid.

Nuisances—Several have been reported; all were abated.

I believe the sanitary condition of school houses and public buildings is good.

The water supply is abundant and good.

WILLINGTON—GEORGE A. COSGROVE, ESQ., *Health Officer*.

The only epidemic in the town of Willington during the past year was the measles, of which there may have been as many as a dozen cases last spring. My attention was called to but six cases, some of the others having recovered before I heard of them.

In all the cases that came to my knowledge, notices were promptly posted according to law. No case resulted fatally, and at present, so far as I am informed, there is not a case in town.

There was one case reported as "membranous" croup, but the patient recovered in two or three days.

No other cases of infectious or contagious diseases have been reported.

I do not know of a case of tuberculous disease in the town.

There have been fifteen deaths, but ten of the fifteen were of persons between the ages of 66 and 90; none were from contagious diseases.

Cesspools and surface drains are the common methods of sewage disposal.

The sanitary condition of the school houses is that which obtains in most country districts; but little attention is paid to proper ventilation, otherwise the sanitary conditions are not bad. Not so much, however, can be said of the outbuildings connected with the schools. On inspection I found the condition of the latter so intolerably bad in two of the nine districts that I at once ordered the committees in charge to have them properly cleaned prior to the opening of school.

The water supply is from wells and springs and is generally good.

I have not examined any ice ponds.

I do not think there has been any change in the milk traffic from former methods.

WILTON—DR. A. B. GORHAM, *Health Officer*.

No epidemic of any kind has occurred during the year ending September 1st, 1900.

Measles—Total, six cases. One of these cases contracted the disease in New York, one in Bridgeport, one in Norwalk; the remaining three cases could not be traced. These cases were posted and usual precautions used, and did not spread.

Scarlet fever—Five cases imported from Norwalk. Two other cases which were in the family of a brother where four cases had occurred.

Whooping cough—One case reported.

Typhoid fever—One case; origin unknown.

Not a case of the foregoing contagious or infectious diseases resulted fatally.

One nuisance complained of, and abated.

The school buildings have been examined and put in proper sanitary condition for the coming year.

The water supply for the greater part of the year is good, and is derived from wells and springs.

In one school district I deemed it expedient to urge the building of two closets.

WINCHESTER—DR. S. G. HOWD, *Health Officer*.

There have been very few cases of contagious diseases reported during the past year.

No complaints were made of nuisances.

The school houses were all visited before the fall term and found in good sanitary condition.

The water supply has been inspected and found free from any pollution.

Four ice ponds have been inspected and all found free from any contamination.

Milk—A number of stables have been examined and found clean and well ventilated. One or two are poorly ventilated and overcrowded. Few have arrangements for immediate cooling of the milk. On the whole the milk supply is very good.

WINDHAM—DR. F. E. WILCOX, *Health Officer*.

There has been reported one case each of diphtheria, scarlet fever, and measles.

Several cases of measles of a mild type occurred at South Windham, but in most instances the cases were not attended by a physician, and consequently were not officially reported.

Whooping cough has been more or less prevalent during the year, but no cases were reported.

I have made somewhat extended inquiries of the physicians in town concerning the cases of tuberculosis that have occurred in their practice during the year, to which I add those that have occurred in my own, together with what supplementary knowledge I have been able to gain concerning the different cases, and it is my opinion that not a single case of tuberculosis has been acquired from tuberculous milk.

Several nuisances, real and supposed, have been reported during the year. Where one has been found to exist it has generally been abated on request.

The disposal of garbage is, in general, unobjectionable. Sewage disposal is in part by cesspools, but more generally by surface drainage.

The sanitary conditions of the school houses is fairly good. Water supply is from wells.

There are two ponds in town from which ice is obtained. Both were examined last November and found in proper condition.

My personal knowledge of the customary practice of the dairymen in town to protect the purity of their milk is limited, but as far as my observation has extended I should say that generally no precautions are taken beyond those of ordinary cleanliness.

WINDSOR—DR. NEWTON S. BELL, *Health Officer.*

There have been reported the following diseases:

Of measles, 142 cases, and doubtless there were as many more of which no report was made. Most of the cases were of a mild type and were not confined to the children alone, as there were many adults who had the disease.

Of scarlet fever three cases were reported.

Of diphtheria there were seventeen cases.

Of membranous croup, one case.

While there were many cases of whooping cough, but two were reported.

There have been two cases of typhoid fever, one coming here from another town; the other, the source was unknown.

Of nuisances there have been a number of complaints made, and abated upon request of the health officer.

The sanitary conditions of our school houses and other public buildings are good.

The water supply is also good.

The ice for the town's use is cut from ponds which, so far as can be known, are pure, only two ponds in town being condemned as impure.

And as to the milk supply, while we have no inspector, there is a growing interest among our farmers and dairymen as to the cleanliness and ventilation of their stables, and the health of their cows. The importance of having pure milk is steadily gaining attention.

WINDSOR LOCKS—DR. JOSEPH A. COOGAN, *Health Officer*.

The following contagious diseases were reported: diphtheria, eight cases; scarlet fever, eight; typhoid fever, six. Several cases of measles reported and many unreported.

The death rate for the year has increased as a consequence of the extreme heat affecting so seriously the young children, and producing a greater number of infantile cases than we are accustomed to have in country practice.

Fourteen nuisances have been abated on complaints made, and many more have been attended to.

The people of the town, realizing that we now have a proper place for the disposal of garbage, seem to pay more attention to cleaning up around and about their premises and carting away the debris monthly instead of annually as heretofore.

The public and parochial schools are in excellent shape as far as care and cleanliness are concerned.

The town hall and lockup are not neglected by those in charge.

The water supply is all that can be desired.

The ice supply is of the best and there is no question of the purity of the water from which it is collected.

The dairymen of the town are exceedingly careful as compared with former years, in the way of handling and delivering the milk.

We have here a model farm, with a herd of forty cows that will compare favorably with any in the county.

WINSTED—S. C. WHEELER, ESQ., *Health Officer*.

Measles—Twenty-three cases reported during the year. Restriction by quarantine and fumigation.

Scarlet fever—Ninety-nine cases reported, the origin of which, as far as could be ascertained, was traced to a child who was brought to the Gilbert Home from Wethersfield, Conn. All of the cases were of a mild type. Restriction, quarantine, disinfection and fumigation with formaldehyde gas.

Diphtheria—Fourteen cases reported, the origin of which could not be found. All of said cases were at the Gilbert Home. They were all quarantined in the hospital provided by said institution, which hospital is located at a safe distance from the Home. Restriction by quarantine, disinfection and fumigation with formaldehyde gas.

Whooping cough—Fifteen cases reported. Restriction: ordered patient kept away from other children.

Typhoid fever—Five cases, the origin of which was not learned; all of which were on the outskirts of the borough. Restriction: disinfected the discharges.

No other contagious diseases.

Nuisances—A few complaints were made and they were abated.

Garbage collected in the thickly settled portions of the borough, which is an improvement over last year.

Sewage disposal—Methods of sewage disposal are by private drains and cesspools. No sewerage system. No disease traceable to lack of sewerage system.

School houses inspected and found to be in good sanitary condition. Public buildings in good sanitary condition.

Water supply—Pure water supply furnished from Crystal Lake reservoir.

Ice ponds—I have no personal knowledge of ice ponds and milk.

WOLCOTT—J. HENRY GARRIGUS, ESQ., *Health Officer*.

Wolcott is a small agricultural town of less than 600 inhabitants, who live somewhat remote from each other, and there is but little change from year to year. The surface is very uneven and well elevated.

The people are, as a rule, healthy, there having been but five cases of contagious disease reported during the year. These were measles. There was no physician called, and the house was thoroughly disinfected by the family. We know of no case of consumption among us.

We have had four complaints in regard to the unsanitary condition of some of our school children, which has received prompt and courteous attention, with favorable results.

The refuse from the kitchen is consigned to the poultry yard or pig pen, and the water from the kitchen sink is conducted to a place where it is exposed to sunlight and is absorbed by vegetation. The privy houses are usually placed at a distance from house and well, and have but slight excavations, and receive attention as necessity requires.

When our citizens are sick they are cared for in their own homes.

Our school houses are six in number. Three of them are in good condition, two of them having had quite extensive repairs the past year. The other three are in poor condition in the interior. One of them has been recovered in part this fall. The schools in two of these are very small, in the other there is no school. The outbuildings all needed attention, which they received before the fall term of school. The well at the South school was out of repair; this was placed in order, and the water pumped out.

The church and chapel are in good condition. The town hall, which is seldom used, is rather neglected.

We are supplied with good well and spring water in abundance. Waterbury has four large reservoirs on Mad river and its tributaries for manufacturing purposes. Bristol also has a large storage pond in town. New Britain and Southington are using water from our pure mountain brooks for drinking purposes.

We have large quantities of excellent ice every winter, but we are so far from the city that it is not utilized.

Mr. Hiram E. Welton cuts ice for Waterbury market; he has three ponds on the same stream; the water is good, and proper precautions are taken to keep the ponds free from contamination. This was the only pond inspected by me, being the only one from which ice was cut for public use.

I have had no complaints in regard to the milk supply, and have not made a personal examination, but since questions have been asked by the State Board of Health I will inform myself in the near future.

I have attended two health officers' meetings during the year.

WOODBIDGE—DR. JOHN W. BARKER, *Health Officer*.

Our usually healthful town has maintained its character for healthfulness. We have had no visitation which could have been called an epidemic. There have been a few sporadic cases of the more common infectious diseases, but less in the aggregate than in past years.

Diphtheria—Two cases of diphtheria were reported.

Only one case of whooping cough came to my notice and that was a convalescent one from out of town.

Typhoid fever—One case of typhoid fever was reported.

In the above cases notice to the public by card was given, and quarantine made when required by the conditions of each case.

In regard to consumption, I think this town, as compared with other towns, has been remarkably free.

The complaints in regard to nuisances have been few, there having been only one of importance. That was in regard to the condition of the first of the old match factory ponds, which might have been a serious matter had it not been promptly attended to.

Garbage—The question is being seriously considered as to the right of towns adjacent to large cities to prohibit the removal of garbage from the cities to the towns, and also in regard to its being removed through the towns to towns further away. It would seem that some concerted action will needs be taken at no distant time by the towns near cities in regard to this matter, if the present system—or want of system—of garbage disposal should continue as it is now, in New Haven for instance.

I made a thorough inspection of the six school houses and their outbuildings, just previous to the commencement of the fall term of school, and am much pleased to say that I found them in a satisfactory condition, in a sanitary sense, more so than in past years; but there is room for much improvement in regard to the outbuildings of a number of them yet.

Ice ponds—I have inspected the three or four ice ponds in the town and I found them in a sanitary and safe condition; in one

or two instances greatly improved over the condition in former years.

Milk—In regard to the commercial milk supply I think there is a general improvement in methods and care of milk, as the public are becoming more and more alive to the great importance of the subject; yet there is room for improvement in many instances, which I think will follow as the milkmen become better educated in the matter.

WOODBURY—DR. E. L. SMITH, *Health Officer*.

All cases of contagious diseases reported have occurred between January and June and were the following: Measles, twelve cases; scarlet fever, thirteen; diphtheria, fifteen; cerebro-spinal fever, one. The measles have been of a uniformly mild type.

The primary cases of scarlet fever occurred in families of farmers, who made frequent trips to neighboring cities and towns in which the disease then prevailed, and to that source I ascribe the origin of the epidemic. It was transmitted to secondary cases in some instances by visiting from house to house before the disease was known to exist. The epidemic was of mild type and limited to the farming districts on the northern border of the town.

Diphtheria appeared almost simultaneously in two families in the month of January. Strict quarantine was enforced, and the schools closed for three weeks, during which time no new cases appeared, but subsequently on opening the schools, new cases developed, one or two at a time, until June, and almost entirely confined to children who attended the Hotchkissville School. The epidemic was not of a virulent type, although there were several malignant cases, two resulting fatally.

The usual methods of quarantine and disinfection were employed.

There were recorded thirty-nine deaths during the year past, which is considerably in excess of the death rate of former years. This excess I account for by the high mortality among infants and the aged.

Nuisances—But two complaints, these of trivial nature, were abated.

The sanitary condition of the school houses is good, the Hotchkissville school house having been fumigated and cleaned.

The public ice supply is procured from a single pond, the owner of which is careful to exclude all contamination.

The only sanitary improvements undertaken during the past year, are an extension of the driveway in Orenaug Park and the sixty foot steel tower now in course of erection there.

WOODSTOCK—DR. JOSEPH SPALDING, *Health Officer*.

There has been an unusual amount of sickness in the town during the year. The aged and infirm have contributed largely to this, tracing their ailments back to an attack of la grippe in the winter as an initiative.

Measles, contracted by a youth while on a visit to a neighboring State, was transmitted to a school of fifty pupils, and thereby thoroughly spread; as a result, one hundred and sixty-eight cases were reported—luckily without any fatality or serious sequel.

Whooping cough has been confined to narrow limits, only five cases. No other infectious diseases noted.

Much more care is being taken by families in caring for tuberculous diseases, and this precaution is, I believe, already showing favorable results.

Less complaint has been made of nuisances. All have been ready to aid the health officer, except in a family infested with lice, where contrary disposition rather than admit the fact allowed an increase of the pest; prompt measures soon remedied the trouble.

School houses well cared for; water supply from wells and springs. A number of ice ponds have been examined; none condemned.

Milk supply handled so that it will best reach the markets; no extraordinary precautions taken to protect the purity of the milk.

I feel confident that an act of the Legislature regulating the manner and care of milk production, prescribing certain sanitary rules as to washing, construction of standing floors for cows, care of utensils, etc., would result in great good to the consumers as well as the producers. Such laws to be in force wherever milk or butter were offered to the public for sale.

MISCELLANEOUS PAPERS.

REPORT OF DELEGATE TO THE CONFERENCE OF THE STATE AND PROVINCIAL BOARDS OF HEALTH OF NORTH AMERICA.

The Conference was held in the parlors of the Hotel Dennis at Atlantic City.

The Conference was well attended, due in part to the exceptionally strong attractions of this noted and popular health resort, and partly to the fact that at the same time there were conventions of other kindred scientific bodies, to wit: The American Medical Association; the American Academy of Medicine, and the National Confederation of State Medical Examining and Licensing Boards. There were 36 delegates present, representing twenty-five different State Boards of Health. The Provinces of Canada and Mexico were not represented.

The Conference was invited to attend the meetings of the American Academy of Medicine, and by vote accepted, and reciprocated the invitation.

The sessions of the Conference continued two days—Friday and Saturday, of June 1 and 2. A morning, afternoon and evening session was held on Friday and two sessions on Saturday.

A large part of the time was occupied in the reading of papers and the discussion of the practical questions relating to schools and the hygiene of school life as it is found to be, and as it ought to be, in the public and private schools of the times.

Briefly mentioned, the subjects of the papers and the discussions during the earlier session of the Conference, treated of ventilation of school rooms; the heating and lighting of school rooms; the furniture of school rooms, as to blackboards, desks, seats, the material and color of the walls, material and care of floors, and the housekeeping of school rooms.

All the above topics are of prime importance, but they are such as too rarely come under the direction and control of boards of health. School visitors, boards of education, and town committees, have already provided all the conditions which govern in such matters. And in many instances they have conducted

their operations from the standpoint of the economist rather than that of the sanitarian.

But the attention of the Conference was not wholly given to conditions so much beyond their control. The more directly practical and on that account the more in line with the purposes of the Conference, and therefore more useful, were the following topics: How to deal with contagious disease outbreaks among school children; The wisdom of closing schools during such outbreaks; The vaccination of school children; Duration of exclusion from school of children convalescent from infectious diseases; The sanitary advantages of medical inspection of schools; The supply of vaccine virus, by the State, or from private sources; The relation of water supplies to the health of school children; The disposal of excreta at schools, latrines, privies, etc.; The placarding houses for contagious diseases.

The final topic, which elicited considerable interest, was the following very important inquiry:

"WHAT ARE THE MOST PRACTICAL AND SUCCESSFUL WAYS OF
EDUCATING THE PUBLIC IN THE PRINCIPLES AND
PRACTICE OF SANITARY SCIENCE?"

To this inquiry, your delegate submitted the following paper:

Almost the first thought suggested by the question is: Does the public need to be educated in order to enjoy the benefits of practical sanitation? If so, why? The conditions of the problem are quite unique and extraordinary. It is not uncommon in this latter half of the 19th century to find very radical and revolutionary changes in the habits and practices of entire communities. Are these permanent mutations in the life customs of people the consequence of public education or have they been effected independently of such a process?

Witness the substitution of the lucifer match for the steel and flint, gas and electricity for the tallow candle, the sperm oil lamp and the dangerous camphene that our fathers used. The canal packet and the four-horse stage have given way to the steamship and the railroad train, the omnibus to the trolley. The telephone and the telegraph have largely supplemented the mails; and in hundreds of other ways reflect how much the conditions of daily life are altered from those of only one

generation gone. The illustrations need not be multiplied, they are familiar to you all. But the point I wish to note and emphasize by reference to these things is, that all these changes have come about without any special effort to instruct the people about the principles of artificial illumination or those upon which steam and electricity generates power.

There was no general education of the public required for the introduction and adoption of those remarkable changes. They are in fact almost wholly the outcome of private enterprise, undertaken by citizens of foresight and good judgment, who could foresee that such investment of capital would be sure to bring results that the people would appreciate and use. It was only necessary to demonstrate that gas gives better light than tallow, and that electricity can carry messages faster than the mails. Not one in a thousand who enjoy these advantages knows or cares to know how they are produced. The public will be satisfied simply with the results, and will maintain them and pay for them as necessities until they are displaced by something better. The things which satisfy the public are practical, appreciable results. It will accept but little in the form of promises and predictions. It must see actual demonstrations. The demonstration must be made first. If that is satisfactory and supplies a need, its acceptance with the pecuniary returns is a certainty.

But to secure that acceptance one more advance is necessary. The results must be put upon the market. They must be available to the people by purchase. A passage on the steamship or railroad is sold at retail to any one who wants it. Electricity and steam power is sold by measure to all who want them. But the store of these commodities is not provided from the public funds. No legislature, no city council, no town meeting has voted the appropriation necessary for their production.

All the things above mentioned have been provided by individual sagacity and business enterprise. The sole but efficient incentive to these undertakings is money, pecuniary profit, the expectation and realization of large returns from the capital invested. It was private interest, independent of public interest, and without public aid or encouragement, that has developed, improved, and so far perfected, the innumerable appliances which have become the necessities of modern life, and which we

call progress in civilization, and which has altered the habits and modes of living of whole communities, even nations.

But such enterprise is not attracted to the development of public sanitation. The results of good public hygiene have no marketable value; no place for the investment of capital that will return a revenue. The effect, therefore, is that expenditures for maintaining and improving the public health have to be undertaken in large measure by the public itself. Although of priceless importance to the private citizen, there is no money in it for him.

That is why the good public need to be instructed in the principles and practice of sanitary law. They or their representatives must take the initiative. They must construct sewers, introduce wholesome public water supplies, erect contagious disease hospitals, organize a sanitary police, for the abatement of nuisances, the inspection of food supplies, and the enforcement of sanitary regulations. But all these things cost money, and there is no money return. The promised results of better health, of fewer deaths, and longer lives, are not merchantable. But there is expense. These proceedings are costly. In their ignorance of sanitary science they doubt the benefit. The responsibility of expending the public money on uncertain projects they dare not undertake or cannot undertake without due authority from the public. Hence I repeat the need of cultivating public sentiment on this subject, because without public approval little or nothing can be done. The public must first be assured that the expenditure is wise and judicious. And just so long as the public remains ignorant, the public health must suffer.

It is because of this, that applied sanitary science is so far behind the applications of science on business lines, which afford opportunities for profitable investments.

Take a view from another aspect. All the successful business applications of science have been undertaken by experts or on the authority of experts, after the most careful investigation of costs and the probabilities of profit. But the public are not experts, nor are city councils or the State legislatures, some of whom must first give authority for such expensive undertakings. And being inexpert but beset on one side by enthusiasts and extremists or by scheming contractors, and on the other by an

equally formidable force of doubters, it naturally happens that they choose to "rather bear the ills we have, than fly to others that we know not of."

Impatient reformers sometimes unwisely indulge in strong language, and in emphatic terms denounce the law makers as ignorant, narrow-minded and stupid. This is not often helpful to sanitation, because it is not true. Such men are generally above average intelligence, by reason of which they are put in authority. And the prudence and sound judgment which has enabled many of them to acquire blocks of stock in gilt edge investments for their personal benefit, also deters them from investing the public funds in schemes with which they are not familiar. Therefore it is very desirable to know how to educate the public in the principles and practice of sanitary science most successfully.

I have said, applied sanitary science is slow in progress, does not keep abreast of the known advances in scientific sanitation. There are exceptions to this general rule, and the exceptions prove the rule. It has sometimes happened that the introduction into a community of an abundant supply of wholesome water, has been accomplished even against a strong public opposition, and has proven to be of the highest salutary influence. But it was a speculative private enterprise that did it, because capitalists recognized that wholesome, pure water is a necessity and commands a price, and can be made to pay good dividends on the cost. And if the people had been educated as to their real needs as well as the capitalists, the appropriation necessary for so valuable a sanitary measure would have been readily made from the public treasury. Such experiences, too, have educated the people. Indeed it would now be hard to find a town or village that does not appreciate the sanitary importance of a good water supply for general use.

It is, however, within the recollection of the writer to hear the question vigorously debated in a large city. Sometime in the early fifties, a public meeting was held in the largest hall in said city to discuss the subject. The opposition to permit a chartered water company to introduce a public supply was very strong. Arguments were made on both sides with force and feeling. Towards the close of the discussion, the chairman, without leaving the chair, arose and proceeded to express his

opinion. He was a highly respected elderly gentleman—upwards of 60 years of age—over 6 ft. in height, erect, broad-shouldered, muscular, the very type of robust, vigorous health—a leader in public affairs in the town. He said he was amazed at the arguments offered in favor of the water supply, and particularly that we need it, that we may have bath rooms in our houses. “What an absurdity,” he exclaimed; “you would not use them if you had them, and you wouldn’t use them anyhow. Look at the chair—the chair has not taken a bath in 20 years, and you don’t, any of you, need a bath more than the chair does!”

Mr. President:—Enough has been said to show why it is that public sanitation, requiring special legislation, and an expenditure of the public funds, can only proceed, with few exceptions, when sustained by an appreciative public intelligence.

It is not my purpose in this paper to consider in detail “the ways of educating the public.” I leave all that to be developed by the broader experience of the members of this conference in the discussion which will follow.

In conclusion, I will simply offer a few suggestive topics for your consideration.

The press is the most powerful promoter of progress in whatever direction it is exerted. Sanitary journals and periodicals have their uses, but their distribution is limited—they do not reach the people. Circulars on the prevention of disease are but wasted paper, except under the conditions which prompts the locking of the stable door after the horse is stolen. Afflicted and frightened families will read them with profit: at other times they are as useless as the attempt to weld cold iron. But the paper, the daily newspaper, is the power that compels and possesses public attention. Fortunately newspapers are abundant and redundant, and greedy for everything that will entertain their readers. We can use them too, gratuitously. The leading influential men in every community derive from them the most of their intellectual nourishment. Every local health officer should carefully see to it that the prominent paper of his town is well seasoned with sanitary spice. The communications should be brief and pointed. A ten-line paragraph will be read by fifty times as many people as a fifty-line article. Utilize by publication every incident that happens, in illustration of the

benefits of obedience to sanitary laws or the results of disobedience. Keep the people acquainted with the operation of the laws of health.

Lawsuits are not without educational results. It is a very good thing in an educational way to have a city prosecuted for violation of the statutes relating to public health. All the people take an interest in it, many attend the trial, more read the evidence and criticize the witnesses, and add whole blocks of knowledge to their stock of hygienic learning.

But the most effective and successful educators of the public are fatal epidemics. No one thing has occurred, in the last twenty years, that has had so direct an influence to improve the public water supplies of the United States, as the typhoid fever epidemic in Plymouth, Penn., in 1885.

Epidemics are the saddest, most effective and most costly lessons in experience, but they are impressive.

State Boards of Health have too little contact with the people to accomplish much except indirectly in the way of organizing and guiding the agencies which will be effective. The local health officers of a state should be associated together, not only for their mutual improvement, but as a means of proclaiming the importance and dignity of their office. To that end their meetings should be public. And prominent citizens in the places where they meet should be not merely invited to attend, but should be induced to do so and to take an active part in the meetings. Something must be done to dispel the popular error that public hygiene is a subject in which only doctors are interested. Hold meetings in small towns—make them popular. Persuade the local lawyer, the minister, the school teacher, the plumber, the farmer, the storekeeper, the architect, the milkman, and all their wives and their sisters and their mothers to attend the meetings and take a part in them. If there is a lyceum, a debating society, a lecture club, or other literary organization, see to it, that sanitary subjects have their full proportion of attention. Have everyone of them debate the question propounded by the Prince of Wales, when told of the list of preventable diseases—"Why, then, are they not prevented?" Every State Board ought to organize a literary bureau to attend to such matters.

REPORT OF DELEGATE TO THE AMERICAN PUBLIC HEALTH ASSOCIATION.

The meeting of the Association was held at Indianapolis, Ind., on October 22d to 26th, 1900. It was the twenty-eighth annual gathering. The attendance was good as to numbers, but it was specially distinguished by the high scientific character of many of the members present, and by the quality of the papers presented and discussed.

It is not my purpose to do more, in this report, than to give a brief statement of a few of the more important subjects treated of, particularly noting the topics upon which novel ideas were offered or practical suggestions made.

The usual addresses of welcome were spoken by the Governor of the State and other high dignitaries, among whom was ex-President Gen. Harrison.

CAR SANITATION.

A paper on this subject excited a good deal of interest. Its author, Prof. S. H. Woodbridge, of the School of Technology, Boston, being absent, it was read by Dr. J. N. Harty. The paper commented on the difficulty of obtaining facts in respect to the present practice in railroad management, stating that "one-half of the railroads in the country did not reply to the letter of the committee, asking information as to what precautions are being taken to guard their patrons from disease," and others "were evasive" rather than instructive in their replies.

The risks to health incurred by modern modes of travel were pointed out to be due in part to defective ventilation; unconscious association with other passengers having communicable diseases; unsanitary construction of the interior of cars for purpose of embellishment and ornamentation, so that the carvings and crevices of the wood-work may give lodgment of infectious germs not easily removed by ordinary methods; the use of fabrics in the furnishings which are absorbent and retentive of infectious bacteria; the defective regulation of temperature; the habitual neglect of disinfection with trustworthy agents; the universal employment in the berths of

colored blankets, often filthy, which show no soiling, and which are closely packed away in the upper berths during the day; the possibility of polluted water; the single cup service at the water tank; the supply of ice to the water tanks by employes with dirty hands; the uncleanly and often stinking urinals; and the almost equally offensive spittle upon the floors. Some of the above risks could be entirely abolished and all of them greatly diminished by vigilant and intelligent attention on the part of the management.

New Quarantine Methods and Changes which are called for in Marine Sanitation, was the title of a paper which, in the absence of its author, Dr. Alvan H. Doty, Health Officer of the Port of New York, was read by Dr. H. B. Horlbeck of Charleston, S. C.

No paper presented to the Association was received with so much surprise or excited such a protest against the sentiments expressed, as this by Dr. Doty.

Dr. Doty made the startling statement, that after a long experience in practical control of infections and profound study of the subject, he had reached the conclusion that the clothing actually worn by persons in health is not a medium of infection. This statement was so contrary to popular and nearly universal belief that it almost shocked the members of the Association, and would have been received with scant courtesy if proposed by any one of less scientific reputation, experience and recognized judgment as a sanitarian, than the author.

He also stated that the same rule applied to ship's cargoes. He did not claim that exceptions to the rule were impossible, but that they were so rare that they may more properly be disregarded, rather than be subjected to all the expense and inconveniences now practiced to escape the exceedingly few exceptions. In support of his position and in view of the importance of so radical an assault upon the general belief, I may be pardoned for quoting his own language to some extent:

In discussing this subject sometime ago with a very distinguished health official, he emphatically endorsed the statement which I have just made regarding the clothing worn by well persons, and said that in his official experience, covering a period of thirty-five years, he remembered but one case in which the clothing worn by a well person could

have been regarded as the medium of infection. After an active experience of twenty years, I can bring to my mind but one instance of this kind. This occurred during the epidemic of typhus fever in 1893. I was not surprised, however, to find out subsequently that the man who had succumbed to the disease had been in direct contact with persons who at the time were suffering from typhus. During the different epidemics of small pox, typhus fever, etc., which have occurred in New York, the physicians, ambulance drivers, and helpers connected with the Health Department have been in close contact with the patients; the ambulance drivers being frequently obliged to carry the sick in their arms. Nevertheless no evidence that I am aware of, after a careful investigation, has ever been presented to show that infection was carried either to the homes of these officials or to their associates. Cases of small pox, typhus fever, etc., are frequently found which have passed through the various stages of these diseases before detection. In many instances, the relatives of these patients, living in the same apartments with them, who by successful vaccination or otherwise have become immune, are employed in factories where they are in close contact with others, yet without transmitting the disease. The busy medical practitioner may, during the day, visit many cases of infectious disease and may go from them to others without previously changing his clothing or performing disinfection. He has reason to believe that he does not act as a medium of infection; he sees no evidence of it in his own home, nor is evidence presented to him that he transmits disease to his patients. If under the circumstances which I have just cited the clothing worn by well persons does not act as a medium of infection, it is hardly reasonable to believe that danger exists in the clothing worn by those who are in good health and have been for a number of days or weeks removed from an infected port or other exposure.

Bacteriological research goes far to confirm the results of practical experience to which I have just referred, inasmuch as it has shown that pathogenic organisms can continue their existence for only a few hours when exposed in the presence of sunlight and air. As a matter of fact, many careful observers believe that the activity, at least of some, of the specific organisms is inhibited by an exposure of only a few minutes to air and sunlight, and that their activity and power of propagation are not renewed unless brought in contact with proper media. It is upon such evidence that we must base our conclusions in deciding what methods shall be employed to protect the public health.

As I have already stated, exceptions may exist, and occasionally evidence is presented to us from a reliable source which tends to show that disease is contracted through the medium of the clothing of well persons.

It is reasonable to believe that when a person is in close and prolonged contact with a case of scarlet fever or small pox, for instance, then puts on an outside wrap and removes it after going directly to another apartment but a short distance away, he may transmit infection.

However, careful investigation, with the most reliable evidence, shows that this occurs only in rare instances. In connection with municipal sanitation the possibility that such instances may occur should receive proper consideration, and reasonable efforts be made to prevent their occurrence, whereas in marine sanitation this possibility need receive consideration only when infectious diseases actually exist on the arrival of the vessel in port. It is not proper nor does it aid in the advancement of sanitary science to overlook facts. The importance of a clear understanding of this matter, particularly in relation to marine sanitation, cannot be overestimated; it means as a rule, that we can safely dispense with the disinfection of clothing actually worn by well persons arriving on vessels from infected ports; this not only lessens the detention of ships, but diminishes the expense to commerce. In municipal sanitary work this knowledge is valuable, as we are then reasonably assured that the disease will not spread—at least to any serious extent—through the medium of clothing worn by well persons; moreover, it teaches us to make a more thorough inspection in order to ascertain the origin of an outbreak of infectious disease. Such an inspection will frequently bring to light mild, ambulant, or convalescent cases which otherwise would not be found.

When we have given to the patient his clothing and effects, an apartment, and the required attention, and have surrounded the case with every possible sanitary precaution, and when at its termination we have performed careful and thorough disinfection, we have, I believe, given to the public the full protection which is dictated by practical science.

We have equally satisfactory evidence that a ship's cargo does not act as a medium of infection; if exceptions exist they have not been brought to my attention."

Dr. A. W. Senter of Herkimer, N. Y., submitted the "Report of the Committee on Cause and Prevention of Infectious Diseases." He made special mention of the mild type of the prevailing epidemic of small-pox, and illustrated the protective value of vaccination by referring to the fact, that before the Spanish war, small pox was very prevalent in the island of Porto Rico, but since it had come under the control of the United States, the disease had been practically exterminated by means of vaccination.

In discussing typhoid fever as a filth disease, he quoted Dr. Victor Vaughan, who had stated in a report that more than 80 per cent. of the deaths among American soldiers in the Cuban war were due to typhoid fever, propagated by the shameful uncleanness about the military camps.

There was no subject that attracted more interest than that of water. The prominent paper on that topic was the "Report

of the Committee on Pollution of Water Supply," by Mr. Geo. W. Fuller of New York. He briefly described the sensible qualities of a good water supply, and stated that in no department of sanitary science had more substantial progress been made than in the various branches of public works devoted to the purification of water supplies. Ten years ago information upon the subject was very defective, and but few plants were in operation. "During this period English sand-filter plants had been increased from about 1.5 to 19 acres, with respective normal capacities of about 4,000,000 and 57,000,000 gallons daily; and the American or mechanical filter plants had been increased from about 12,000 to 90,000 square feet, with respective nominal capacities of about 36,000,000 and 270,000,000 gallons daily." The projected plans for many large cities promises a very rapid development of both methods of purification, to wit: the English method of slow sand filtration and the American method by rapid mechanical filters. Whichever method is the better in a given instance will depend upon the character of the water to be purified.

Mr. Rudolph Hering said, that in this country the consumption of water was much greater than in Europe, chiefly because we are more wasteful and careless. But an important factor in the waste is because of imperfect conduits and pipes permitting a large amount of leakage. He said it would take twenty years to relay the water pipes of the city of New York and make them tight, and might take a longer time to reform the wasteful habits of the people.

Dr. Wyatt Johnson of Montreal made a strong plea for systematic instruction in the science and principles of public hygiene, and deplored the lack of suitable preparation by so many who are serving on health boards and as health officers.

Dr. L. P. Jones of Greenwich, Conn., submitted a paper advocating the endowment of a chair of "Preventive Medicine" in each of the leading medical colleges of the country, and the establishment of fellowships for a limited number of meritorious students.

The Committee to "Define what constitutes an epidemic" reported in effect, through its chairman, Dr. B. Lee, of Pennsylvania, that the word "Epidemic" was so erroneously and variously understood by the public at large, and the recently acquired

knowledge of the modes of propagation of infectious diseases had added more confusion to the meaning of the term in the public mind, that in the opinion of the Committee the word had outgrown its usefulness, and that its further official use might be misleading and mischievous. The Committee would therefore recommend that its employment be omitted from all sanitary laws and regulations, and substitute therefor a brief statement of the condition which is intended to be expressed by the word epidemic. The report of the Committee was adopted.

The following resolutions were debated and adopted:

1. *Resolved*, That the Association, recognizing the benefits of medical school inspection, heartily approves the efforts of boards of health and of education directed toward the establishment of systems of inspection. (Offered by Dr. Adolph Gehrmann.)

2. *Resolved*, That the Association approves of and encourages all efforts made by governments, whether national, state or municipal, for the limitation of pollution of streams. (Offered by Mr. C. Monjeau.)

3. *Resolved*, That a committee of three be appointed, to be known as the committee on uniform municipal statistics, to take such steps as may seem practicable towards securing greater uniformity in all branches of municipal accounts, reports, and statistics, and particularly those branches relating to vital and sanitary statistics; said committee to have power to confer with similar committees from other societies already or hereafter appointed to the same general end, and to report at the next meeting of the Association. (Offered by Dr. Leal of Paterson, N. J.)

Election of officers resulted as follows:

President, Dr. Benjamin Lee of Philadelphia.

First Vice-President, Mr. Rudolph Hering of New York.

Second Vice-President, Dr. J. N. Hurty of Indianapolis.

Secretary, Dr. Chas. O. Probst of Columbus, Ohio.

Treasurer, Dr. Henry D. Holton of Brattleboro, Vt.

The next meeting will be held at Buffalo, during the third week in September, and during the Pan-American Exposition.

REPORT ON AN EPIDEMIC OF TYPHOID FEVER IN
FORESTVILLE.

BY HERBERT E. SMITH, M.D.

About the middle of April word was received at the office of the State Board of Health from Dr. H. D. Brennan, the Health Officer of Bristol, that there was a considerable outbreak of typhoid fever in Forestville. By direction of Dr. C. A. Lindsey, the Secretary of the State Board of Health, I visited Forestville on April 28th, 1900, for the purpose of making an inquiry concerning the nature and extent of the outbreak and the source of the infection. My investigations begun on that day were continued at a subsequent visit, and by conferences and correspondence with Dr. H. D. Brennan, the Health Officer, with Dr. Charles M. Kent of Forestville, and with several physicians residing in Bristol and Plainville, who had seen cases occurring in Forestville. My thanks are due to all of these gentlemen for the courtesy of their prompt assistance.

Forestville is a village of about 1,500 inhabitants, located in the town of Bristol, fifteen miles west of Hartford on the Highland division of the New York, New Haven and Hartford Railroad. It is in a farming district, but the village contains some factories, the chief of which is the burner factory of the Bristol Clock and Brass Co. The village is not supplied with water from the Bristol water works, but has a small local system owned by private parties which will be more fully described later. There is no sewerage system; the use of cesspools and privies being the common method of sewage disposal.

In order to obtain information concerning the cases of typhoid fever which had occurred in Forestville, letters of inquiry, with the necessary blanks, were sent to the physicians practicing in the village. The data of cases given below are all derived from these reports.

Previous to the outbreak in March there had been no recognized cases of typhoid fever in Forestville during the year, and the last case known began October 27, 1899, and was located on Frederick street. The total number of cases of which reports were received as having occurred in Forestville during the two months ending May 2d was 46. There were two other cases,

one in Plainville and one in Bristol, which obviously belong to the same group, and are therefore included in the following statement of statistics. Of the 48 cases, 25 were males and 23 were females. The ages are shown in the following table:

Under 5 yrs.	6-10	11-15	16-20	21-25	26-30	31-35	36-40	41-45	46-50	Over 50
4	9	5	2	12	3	5	2	3	2	1

The dates when the cases were taken ill were reported to be as follows:

Date, Mar. 23,	24,	25,	26,	27,	28,	29,	30,	31.	April 1,	2,	3,	4,			
Cases.....	4	1	1	—	1	—	—	1	—	5	1	1	2		
Date, April 5,	6,	7,	8,	9,	10,	11,	12,	13,	14,	15,	16,	17,	18,	19,	
Cases	3	2	3	4	1	1	1	3	1	—	2	—	—	1	1
Date, April 20,	21,	22,	23,	24,	25,	26,	27,	28,	29,	30.	May 1,	2.			
Cases	2,	1	1	1	—	1	—	—	—	—	—	—	1	1	

THE NATURE OF THE ILLNESS.

In regard to many of the cases there was no doubt as to the diagnosis in the minds of the attending physicians, as their typhoid character was well defined. As is usual in typhoid epidemics, however, there was a considerable number of mild cases concerning the nature of which there might well have been doubt except for the connection with other cases of better defined characteristics. Certain physicians did express doubt as to the correctness of the diagnosis, especially during the early part of the epidemic, and there was much uncertainty on the part of the public.

At the time of my first visit samples of blood were taken from three selected cases with the object of applying the Widal test. The first case was that of a lad of 11 years, who was in the twenty-eighth day of his illness, the typhoid nature of which there appeared to be no doubt. The second case was a young lady of 20 years, who had been ill thirteen days with a mild febrile attack. The third case had been under the observation of a physician for eight days, and was believed to be suffering from a malarial fever. The three samples of blood were examined by Prof. C. J. Bartlett in the Bacteriological Laboratory of the Yale Medical School, and he reported that all of them gave positive reactions with the Widal typhoid test. This result confirmed the diagnosis of typhoid fever and indicated

that the mild cases were of the same nature as the well-marked ones. The general serious character of the cases is indicated by the comparatively high mortality; there having been seven deaths at the time of writing.

THE MEANS OF INFECTION.

It is a well recognized principle in seeking the cause of an outbreak of typhoid fever affecting a considerable number of persons, to look for it in connection with the food supply. Addressing myself to this problem, it was quickly ascertained that the persons affected in the Forestville outbreak were not so connected socially that they could have been infected at any public gathering, as might have happened through the agency of infected ice cream or oysters at a dinner. There had been no such gathering, furthermore the dates on which the cases occurred did not indicate an infection occurring on a single occasion, but rather that the period of infection had extended over many days. Neither was there any common place where infection might have occurred such as might result from employment of all the persons affected in one factory. Therefore, the cause was to be sought in some common means of infection which might reach a large number of persons in their homes or boarding places. Of such means, the ice, milk and water supplies especially call for investigation.

The Ice Supply.

The ice supply of Forestville is furnished by one dealer and is derived from a pond situated near the village. It was quickly eliminated as a possible source of the infection, as immediately preceding the outbreak and during the first part of it no ice was furnished for family use, the trade not usually beginning until the first of May.

The Milk Supply.

There were two regular dealers who furnished milk to customers by delivery wagons. They supplied most of the milk sold in the village, but there were several other persons who supplied special customers and persons in their neighborhood.

Of the 48 cases of typhoid fever, 22 were supplied by one of the regular dealers, 8 by the other, and 8 were in families

supplied by both dealers. Of the remaining 10 cases, 4 obtained their milk from one source and the others from six different sources. It therefore appears that 22 of the cases obtained milk wholly from one dealer, and that 8 others derived part of their supply from him, and hence that 30 cases may have used milk from this source, but that 18 others did not have any connection with it.

Because of the large number of cases connected with this supply the following details concerning it are given. The dairy is located in Forestville and the milk route in the village includes 60 families. About three times as much milk was sold to customers in Bristol, three miles distant, as in Forestville. The milk was derived from four sources; that from one source was sold chiefly in Bristol. The milk from the other three sources was all mixed in a tank at the dairy before distribution. Of this mixed milk, one-fourth was used in Forestville and the rest in Bristol. During the prevalence of the epidemic in Forestville, there were very few cases in Bristol. Two cases, however, were reported to me by physicians as having occurred among the customers of the dairy in question. That the milk was the source of the infection of these two cases occurring among several hundred customers, is doubtful. The facts presented show conclusively that the common means of infection in Forestville was not in any of the milk supplies.

The Water Supply.

The village is supplied with water from numerous wells, none of which are used in common by a large number of persons, and from the pipes of a small local water system which has been operated by a private company for about twelve years. The water furnished by the company is drawn from a spring situated in the western part of the village near the corner of Stafford avenue and Brook street. The water is pumped from the spring directly into the distributing pipes, but the pipes are so arranged that any excess of water pumped is forced back into a reservoir situated west of Grove street. There are about three miles of distributing mains, which are in part 4-inch cast iron, but mostly small galvanized iron pipes.

The Spring.—This is located in low ground about 300 feet from a small river which is known as the North Branch of the

Pequabuck River. It is covered with a small wooden building. Being in the village, there are several houses in the vicinity, and two privies with vaults within fifty feet. The water varies in temperature between 48° and 52° F. and is, therefore, probably mostly of deep origin. It was formerly used to supply trout hatching ponds, but is used now only as a water supply for the village.

The Pumps.—There are two pumps located across the river from the spring. They were connected with it by two 2-inch galvanized pipes, which therefore ran across the river. The pipes were connected in the pump-house, so that each pump drew on both pipes. The pumps are operated by water power derived from a dam a short distance up the stream. The water is forced by the pumps through two delivery pipes across the river again into the distributing mains.

The Reservoir.—This is sixty feet long by twenty feet wide and four feet deep, and has stone walls and a hard-pan bottom. It is covered with a tight wooden building. The reservoir is about twenty feet from a cultivated field and a barn yard, both of which are higher than the bottom of the reservoir. There are no other sources of contamination apparent, as the houses in the vicinity are on lower ground.

At the time of my first visit data concerning 27 cases of typhoid fever were furnished me by Doctors Brennan and Kent. The evidence presented in the history of these cases was to the effect that there was no common milk supply for all of them, but that all had used the public water. The suspicion that the water was the means of infection was strengthened by noting the close relationship between the residences of the cases and the course of the water mains, which was clearly seen when both were marked on a map. The importance of discovering and removing the cause of infection was so great that these facts demanded a thorough examination of the water supply without the delay incident to the collection of more complete data. This conclusion was reached and acted upon, although earlier in the day an inspection of the reservoir and source of the water had been made in the company of Health Officer Brennan and Selectmen Congdon, Manross and Warner, and although I was informed at that time that a sample of the water had been examined in a neighboring city and had been pronounced pure.

The sample, the report on which was furnished me by the Selectmen, had been collected from a faucet in the house of Selectman Manross on Center street, near the corner of Garden street, on April 6th, and had been sent away for examination by the acting Health Officer, Dr. Carrington. The following is a copy of the report so far as it relates to the analyses and the opinion based on them. It was dated April 9th, 1900.

"I enclose herewith the result of my sanitary and bacteriological examination of the sample of water you sent April 6, 1900, from the reservoirs of Forestville:

	Parts per Million.
Free Ammonia.....	.0006
Albuminoid Ammonia.....	.0018
Chlorine.....	15.
Nitrogen as Nitrates and Nitrites.....	.000
Bacteria per c. c.....	130.

"Examination in Kashida's medium shows no trace whatever of contamination with any animal matters.

"This sample of water is singularly free from any pollution of any kind, and is perfectly safe to use for drinking. You certainly will have to look for some other source of typhoid infection than this particular water supply."

Under date of April 29th, the author of the report wrote to Dr. H. D. Brennan, commenting on his report as follows:

"I see by this morning's *Globe* that I am quoted as having found a large quantity of chlorine in the sample of water, and that it indicated sewage contamination. By reference to my notes I find that the quantity of chlorine I found was one and fifty-one-hundredths parts per million. This quantity very closely corresponds to the amount to be found in about all the waters in this region, and I am certain does not indicate any contamination with animal matter of any kind."

The evidence above referred to as throwing suspicion on the water was presented to the owner of the water works and he promptly volunteered to make any tests of the system that might be suggested. After another careful inspection of the surroundings it was determined to test the soundness of the pipes connecting the spring and pump-house. And for this purpose the pipes were closed at the spring and one of the pumps started, with the result that a flow of water was obtained. To fix the location of the leak thus indicated, the pump was disconnected and the pressure from the reservoir suddenly turned on. Immediately there was a discharge of air through the water of

the river at a point about 20 feet from the west bank, where the main stream was joined by the flow from the tailrace of a factory above. Examination now showed that one of the two-inch pipes had been broken entirely across, and that the pump end was quite separate from the other piece and hung some little distance above the bottom of the river. After the pipe was removed it was seen that it was somewhat bent about three feet from where it was broken, and that the fracture had occurred at one of the couplings. The nature of the break was such that as the pumps drew on both pipes at once, they must have delivered a mixture of spring water drawn through the sound pipe and of river water taken in through the broken one. Considering the matter of the friction in the two lines it is probable that the river water considerably exceeded the spring water in the mixture. Three samples of water were taken for analysis: one, from the faucet in the pump-house as the water was running back from the distributing pipes into the river, represents the mixed water pumped during the day: one, from the pumps when the spring was cut off, represents the river water as it came through the pumps; and one which was taken directly from the spring with a dipper. These samples were taken by myself between three and four o'clock of the afternoon of April 28th. They were analyzed in the Sanitary Laboratory of the Yale Medical School with the following results:

Analyses of Samples of Water from Forestville.—The spring water was clear, colorless and odorless. The river water was clear, contained a scanty brownish flocculent sediment, was yellowish in color (0.3 of color scale) and was odorless. The pipe water was clear, contained a small brownish flocculent sediment, was yellowish in color (0.2 of the color scale) and was odorless.

In the chemical analyses the following results were obtained expressed in parts per million:

	Spring.	River.	Pipe.
Residue on Evaporation, total at 100° C.	89.0	41.5	66.5
" " Volatile on heating in ignitor	10.0	11.0	14.0
Chlorine in combination as Chlorides.....	10.5	3.10	4.70
Nitrogen of Free Ammonia.....	.004	.004	.008
Nitrogen of Albuminoid Ammonia.....	.024	.078	.094
Nitrogen of Nitrites.....	.001	.004	.001
Nitrogen of Nitrates	3.50	.50	1.00
Oxygen Consumed from acid Permanganate			
30 m., at 100° C. ....	.25	2.85	2.90
Hardness, equivalent to Calcium Carbonate....	37.	15.	20.

In the bacteriological examination the number of bacteria growing in peptone gelatine at the room temperature in seventy-two hours was as follows, expressed in the number per c.c.

Spring, 22 ; River, 297 ; Pipe, 183.

In cultures made in lactose-litmus-agar at a temperature of 38° C. acid-producing growths were obtained in the river and pipe water, but none in the spring water. In order to ascertain whether these acid-producing forms were the colon bacilli, cultures were made from selected colonies, and bacteria were separated from each of the duplicate plates from the river and pipe water, which produced gas when grown in dextrose gelatine; gave positive results with the indol test; coagulated milk with the formation of acid, and which on microscopical examination were motile short rods. From these tests it was concluded that the colon bacillus was present in the samples of river and pipe water.

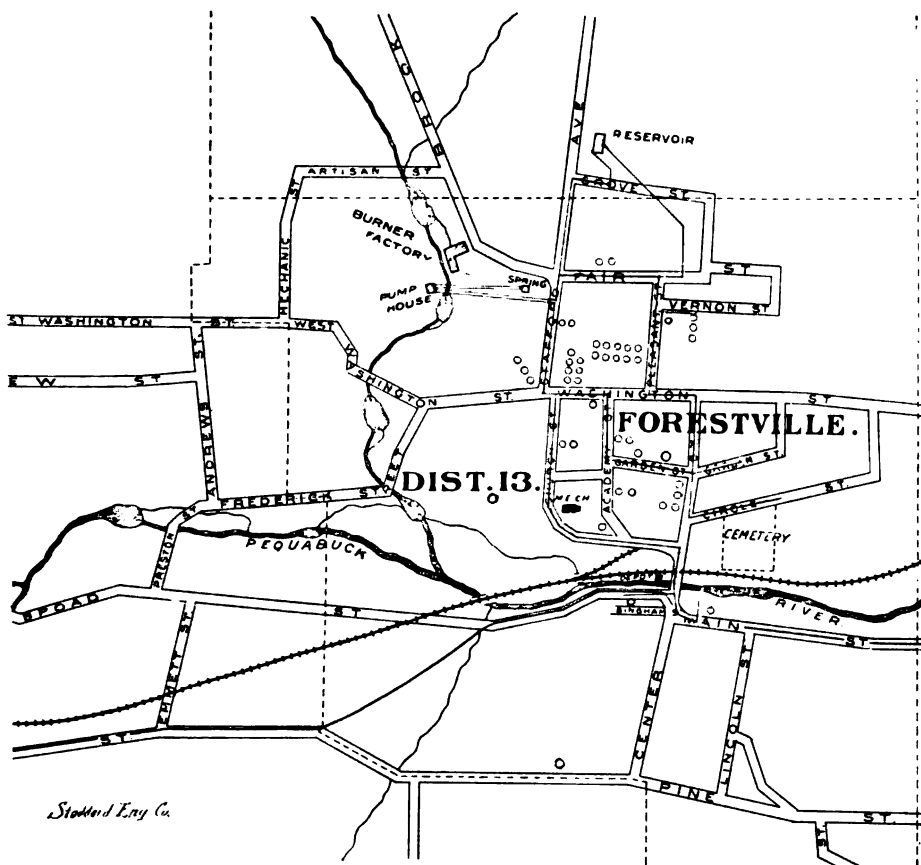
The spring water presents the characteristics commonly found in springs and wells in more or less thickly inhabited sections where the ground water has received a sewage pollution from the drainage of houses, but where the organic matter of the sewage has been largely removed by the process of oxidation as the water has percolated through the ground. That the purification has been quite satisfactory in this case is indicated by the low figures for nitrogen of albuminoid ammonia and for oxygen consumed, which are the data referring especially to the organic matter. That the past contamination had been considerable is shown by the figures for chlorine and nitrates. The normal average chlorine for the region is about 1.8 and the difference between this and 10.5 is to be taken as an index of the amount of past contamination. In percolating through the ground the nitrogen of the organic matter in the contaminating material is oxidized and exists in the purified water in the form of nitrates. The amount of nitrogen of nitrates in this water, 3.50 parts per million, indicates a considerable past contamination. The number of bacteria, 22 per c.c., is less than might have been expected from an open spring situated as this is. The small number of bacteria, the absence of the colon bacillus and the low figures for nitrogen of ammonias are to be taken as evidence of the absence of direct

sewage contamination. Concerning the future use of this source of supply, it may be said that a water having these characteristics is necessarily subject to suspicion as one liable under favorable conditions to become the means of infection, as there is no certainty that the purification will be as complete at all times as the above analysis indicates was the case at the time the sample was taken.

The results of the examination of the river water indicate that it was a pretty pure surface water which had received a small sewage contamination, this being seen chiefly in the moderate but distinct increase in the chlorine and in the presence of the colon bacilli. The water drawn from the pipes resembles the river water more than that from the spring, and presents the same evidence of sewage contamination.

The analyses indicate, therefore, that the pipe water contained recent sewage contamination, and that this came from the river water rather than from the spring. As will be shown later, the source of the sewage contamination was such that the contaminating material must have varied considerably from time to time. This fact affords a ready explanation of the presence of more organic matter in the pipe water than in the sample of river water, and also for the absence of a uniform ratio between the chief constituents in the three waters.

The Relation Between the Cases and the Water Supply.—The accompanying map shows the location of the 46 cases occurring in Forestville, and also the course of the distributing water mains. It will be seen at a glance that there were four cases that were not located on the lines of the pipes. Two of these occurred in one house and were probably secondary cases, as the persons were in attendance upon a case which began on April 1st, and as they were taken ill on April 18th and 21st, respectively. The other two, located on Pine street and Swede Row, were men whose places of business were on Broad street, near the corner of Main, where they used the public water supply. Many of the houses on the line of the water mains were not connected and the occupants did not regularly use the public water. Three cases living in houses on streets through which the water mains passed were reported as using only well water at home; two of these, however, drank the public water at their place of business. The remaining case, which occurred on April



MAP OF FORESTVILLE.

Red lines show the situation of the water mains.

Red dots show where cases of typhoid fever occurred. Where more than one case occurred in the same house the fact is indicated by placing other dots behind the first one.

23d, used well water, and no information was gained which would permit of an opinion as to how she received the infection. It occurred in a house next to one of the fatal cases and may have been due to secondary infection. Every other case was reported by the physicians in charge as having used the public water supply.

In addition to the 46 cases in Forestville there was one in Bristol and one in Plainville, which as already stated are to be considered as a part of this outbreak. One was the case of a lad of nine, who was visiting from April 12th to 17th, in Forestville, in a house on Washington street, supplied with the public water. He was taken ill in Bristol on May 1st. The other was that of a young girl attending school in Forestville, who had also spent much of her time with relatives at a house on Center street, where she had drank the public water. She was taken ill on April 1st. Out of the 48 cases, therefore, three only are not known to have used the public water, and two of these are reasonably accounted for as having been secondary cases, and the other may have been such.

These facts are especially significant as fixing the water as the means of infection when it is considered that but 86 tenements were supplied with the water, and that these tenements represent perhaps 400 persons, or about one-quarter of the population of the village.

THE SOURCE OF THE INFECTION.

It has already been shown that the public water supply contained a large admixture of the water of the North Branch of the Pequabuck River, and that the sample of water from this river and from the pipes both showed by their chemical composition, and the presence of the colon bacillus, that they had received sewage contamination. This river has a watershed above this point of about 13 square miles, on which are located a number of farm houses. There are three or four small shops on the upper part of the river employing from one to five hands each. Doubtless some contamination comes from these sources, but it would appear that it must be small. The chief contamination of the river occurs at the factory known as the Burner Factory, situated in Forestville. This place employed during the past spring about 200 hands. All the waste from this fac-

tory passes into the river. The chemicals employed are chiefly such as are used in cleaning brass, as soap, potash, and certain acids, chiefly nitric acid. The acids which are used for dipping the brass naturally dissolve and carry with them a certain amount of copper and zinc. The total amount of acids of all kinds amount to only about a carboy and a half a day. Concerning the effects of these chemicals upon the water, it may be said that the sample of river water analyzed was found to be neutral to litmus, and that none of three samples taken gave any reaction for copper with hydrogen sulphide which could be seen in a layer of water nine inches deep. The contamination of most significance as the possible source of typhoid infection, is of course the excreta from the employees. The factory was well supplied with closets of an excellent design and they were much used. In all there were 26 closets and 6 urinals, which were so placed that their discharge went directly into the stream at a point where the channel was so narrow as to promptly wash the material down stream. This outlet was about 300 feet above the point where the broken pipe was located. The conditions were such that the water pumped must of necessity contain some of the excreta discharged into the river at the factory. Without doubt this was the source of the sewage contamination and of the colon bacilli found in the sample of water analyzed. No information was secured tending to show that there were in the factory any cases of typhoid fever prior to the outbreak in Forestville, although there were ten or twelve of the employees of this factory among those who were ill. The hands employed were shifting more or less, and came from Bristol, Plainville and New Britain, as well as from Forestville, and it was practically impossible to investigate thoroughly this part of the problem. Typhoid fever had existed earlier in the year in both Bristol and Plainville and an undiscovered convalescent or walking case may easily have been among the 200 employees of this factory and have infected the river water.

Time of the Infection.

The outbreak began with four cases, which occurred on March 23d, after which there were but four during the rest of the month. During the first half of April there were 30 cases, which were followed by only 10 cases up to May 2d, when the statistics were gathered. Information has reached me of

three cases occurring since that date. This distribution of cases calls for a period of infection extending from the early part of March well along into April. Of course it is possible that the contagium existed in the water up to April 28th, when the break was discovered and closed, and that the lessened number of cases was due to the precautions taken in using the water, or to the relative immunity of those not already ill.

As to the time when the water pipe was broken, it may be said that this probably occurred at the time of an unusually high flood on the first day of March. There were two other occasions during the winter when the water was high, but at this time it was reported as being higher than the usual spring freshet. This flood was occasioned by an unusually heavy rain when the ground was frozen. The water surrounded the factory and flowed over the region where the spring is located to such an extent as to rise three feet above the level of the spring. A short distance below the point where the pipes crossed the river, and at a bend in the river, were lodged a heavy timber and a trunk of a large tree, which came down at the time of this flood. As the pipes appeared to be strong, and as the one that was broken was bent slightly about three feet from the point of fracture, it seems probable that it was broken by being struck by some heavy object, possibly one of these timbers, at the time of the flood. If so, the water supply began to be contaminated with river water the first day of March, and this contamination continued until the day of its discovery, April 28th. The date thus fixed is twenty-two days before the first cases of typhoid fever appeared, a period entirely consistent with the known period of incubation, when it is considered that for the first few days, owing to the large flow of water due to the flood, the contaminating material must have been very largely diluted.

Conclusions.—The conclusions reached in this investigation are, that the outbreak in Forestville was one of typhoid fever: that there were about 50 cases, and 7 deaths: that the infection was received through the drinking water regularly supplied to about 400 persons: that the water became infected by an addition of river water caused by a break in one of the inlet pipes where it passed through a river: and that the river water was sewage-contaminated by the discharge from the closets of a factory employing about 200 persons, and situated a few rods above the location of the break in the intake pipe.

A REPORT ON THE SEYMOUR SPRING, SOUTH NORWALK.

DR. C. A. LINDSLEY, *Sec. State Board of Health*:

Dear Sir:—As requested by you, I have made an investigation into the history and present condition of the Seymour Spring at South Norwalk, and submit the following report:

On August 3, 1900, I visited the spring in company of County Health Officer George E. Hill, and City Health Officer William J. Tracy, M.D., and on a subsequent date alone. To Dr. Tracy, and other physicians of South Norwalk, I am under obligations for information concerning cases of typhoid fever in the vicinity, and to Mr. Seymour, the owner of the spring in question, for many courtesies.

The spring is situated on Seymour Place, a short distance west of West Ave., South Norwalk. It is at the base of a steep granitic ledge, along which, and about twenty to thirty feet above the level of the spring, runs Connecticut Ave. The spring is one of two that outcrop at this point, and has been used as a domestic water supply by the owner at his house on West Ave., for nearly forty years. For the past fifteen years four other houses have also been supplied from the spring, two on West Ave. and two on Seymour Place. These five houses are the only ones into which the water has been piped, but there are five or six others in the near vicinity in which the water has sometimes been used for drinking, it having been obtained in these cases directly from the spring.

In the family of the proprietor there is no history of typhoid fever, the only suspicious case being that of a daughter who had a mild febrile attack in November, 1899, which was diagnosticated as malarial fever. In each of the other four houses there have been one or more cases of typhoid fever within the last six years. The first cases were two which occurred in the Slater house in September, 1894; then there were two in the Hoyt house in March, 1895. The family occupying this house moved into another in 1899, and just as they were moving two more cases occurred, one on November 27th, and the other on December 3d. A third case, that of a child, occurring December 10th, is believed to have been secondary. In October of the same year, a case occurred in the Weed house, and about the same time another member of

the family was ill with typhoid fever in Stamford, but whether the infection was received at home is uncertain as the conflict in the testimony concerning dates makes it impossible for me to decide. In the Hatch house, the last of the five, a case occurred in May, 1900.

In the other group of houses referred to, there were three cases occurring in July, 1900, two in the house nearest the spring on Seymour Place, and one in the house on Connecticut Ave., immediately back of the spring. The last mentioned case was a mild one, but a sample of blood taken from the patient on August 9th, and examined by Professor C. J. Bartlett of the Yale Medical School, gave a positive Widal reaction. All of these cases had used the water for drinking.

It appears, therefore, that in the five families occupying houses directly supplied with spring water, there have been ten cases of typhoid fever within the last six years, and that there have been three other cases in the houses in the immediate vicinity of the spring. In cases scattered over such an interval of time it is of course impossible to assert positively the source of the infection, but the undue prevalence of the disease in this group of houses is significant, especially as in no case could the physicians assign any other probable source of the infection than the spring water.

The spring is enclosed in a small building and is not liable to surface contamination. The water is clear, tasteless, and free from odor. A chemical analysis was made from a sample taken in December, 1899, and by the courtesy of Mr. Seymour, the results are given here in comparison with those obtained from a sample taken in August of this year.

ANALYSES OF SAMPLES OF WATER FROM THE SEYMOUR SPRING,
SOUTH NORWALK.

	Dec., 1899.	Parts per Million. Aug., 1900.
Residue on evaporation,		
Total	127.	110.
Volatile	20.	23.5
Chlorine, combined	14.5	11.3
Nitrogen of Free Ammonia .....	.014	.020
" " Albuminoid Ammonia...	.020	.056
" " Nitrites .....	.002	.000
" " Nitrates	5.5	3.7
Oxygen consumed from Permanganate in one-half hour at 100° C. ....	.60	1.05
Hardness, as Carbonate of Calcium..	50.	35.5

The results of these analyses show that the composition of the spring water is somewhat variable, and that the August sample contained a rather large amount of organic matter for a ground water. In both there is evidence of a considerable past contamination.

No bacteriological examinations were made of these samples, but the porcelain tube from a Pasteur filter which had been in use on the line for three days since the last cleaning was obtained and examined as follows: The thin, slimy, brown coating was scraped off with a strong sterilized platinum wire and mixed with sterilized water. To 100 cc. of this mixture there were added 50 cc. of nutrient bouillon and $1\frac{1}{2}$ cc. of Paretti's solution, and the mixture incubated at 38° C. A growth was thus obtained which gave red colonies in litmus lactose agar; produced gas abundantly in dextrose gelatine; coagulated milk; and gave the indol test. These reactions are those given by the colon bacillus and may be taken as establishing the probable presence of this bacillus in the spring water.

The results of the chemical and bacteriological examinations, therefore, indicate that the water was sewage contaminated. Concerning the source of the contamination, the following facts were discovered. For ten years prior to 1887, a cesspool had been in use in the property on the ridge immediately back of the spring, but since that date the sewage has been discharged into a sewer then constructed on Seymour Place. There is still a privy in use on the lot, which has a cemented vault, believed by the owner to be tight. In 1893 a sewer was constructed through the adjoining part of Connecticut Ave. This sewer receives the drainage from the hospital and from Stuart Ave. and Stevens Street. In constructing it, it was necessary to do considerable blasting, as the rock comes near the surface. About three years ago the road was cut down so as to lower the grade, and at this time it was noted that the water of the spring was turbid when it rained. This observation indicates that there are cracks in the rock and is significant as showing that a path exists by which any leakage from the sewer may readily contaminate the spring. That there is some leakage is probable, considering the nature of the material of which sewers are constructed and the manner of their construction. It is notorious that leaking sewers are common. Although it is

possible that the chlorine and nitrates which are indicative of past contamination come wholly, or in part, from the old cess-pool, or even from the privy vault, it seems probable that there has been some direct contamination from the sewer on Connecticut Ave., and that this is the source of the infection if the water has been the source of the typhoid infection. This conclusion is strengthened by the facts that the first cases in 1894, occurred shortly after the construction of the sewer in 1893, and that it is known that there have been cases of typhoid fever on Stuart Ave. from time to time.

The conclusions made from the investigation in this case are, therefore, that there has been an unusual prevalence of typhoid fever among the users of this spring water; that the chemical and bacteriological examinations indicate that the water is sewage contaminated, and that the contamination has probably come from the pipe sewer on Connecticut Ave.

In my opinion the water should not be used for drinking.

Yours truly,

HERBERT E. SMITH.

COMPULSORY LAWS AFFECTING PUBLIC HEALTH.*

BY GEORGE E. HILL, BRIDGEPORT, CONN.

Assuming, at the outset, that I am addressing a lay audience, unfamiliar with the technical divisions and classifications of the law, I may be permitted to suggest certain general propositions concerning the body of the law, as a whole, in order that it may more clearly appear where, in all the great mass of the law itself, those laws which relate to public health, properly belong.

It is a very familiar division of the law which separates it into two great classes:

(1) That body of law which has grown up from repeated decisions of the courts, from time immemorial—that body of “Judge-made law,” usually known as the Common Law, and

(2) That smaller body of law which is the product of legislative enactments and commonly called statute law.

In earliest times criminal laws were largely, if not entirely, of the former class. Judges, acting upon general principles as to the rights of men and their obligations to the community, defined crimes without guidance from legislative enactment, and punished them as in their judgment seemed best. Gradually, and from time to time, legislative authority enacted statutes defining particular crimes and laying upon courts limitations as to their punishment, until now almost every crime, every wrong against the State, has been transferred by legislative enactment from the category of common law to that of statute law: so that by reference to the statutes of our states we can find carefully defined and characterized nearly every crime and every penalty known to our law.

The far greater mass of the law relates to the rights of individuals as against other individuals. This class of law is commonly, though perhaps erroneously known as the civil branch: while that department of the law which relates to the duties of the individual to his fellows collectively, that is to the public in general, is known as the criminal branch. This distinction is important to the

* Read before the New Haven County Public Health Association, December 6, 1900.

health officer, because the line of demarcation between what the health officer may do and what he may not do, is drawn parallel to the line separating crime from private offenses. Do not misunderstand my last proposition: I do not say that the condition which confronts a health officer must constitute a crime before he has jurisdiction over it. That is not my meaning. I mean that before his jurisdiction commences he must find that the condition confronting him is one which affects the community as a whole, and not merely the individual in his private capacity. The law provides that individual wrongs may be remedied (and in some cases punished even) by a private action in behalf of the person wronged; but when the party wronged is not the individual but the community, then the remedy lies in the hands of the State, and through its constituted authorities the State must redress or punish it if punishment or redress is had.

That this is the line of distinction marking the jurisdiction of a health officer may not be clear at first sight because, in so many instances the wrong which the health officer is called upon to remedy, is one which partakes of a dual character, being both a public wrong and a private injury.

Let me illustrate from a familiar wrong outside the scope of health laws: If I meet you upon the street and strike you an unprovoked blow, I have committed two wrongs. I have wronged the public by assaulting one of its component parts: for that wrong you cannot lawfully punish me. That is the State's affair. But I have committed also a private offense against you. I have injured you perhaps in person, property and feelings. For that wrong you may or may not, as you see fit, bring a civil action against me in your own name, claiming compensation in money.

Now many of the matters with which the health officer is called upon to deal (and I am referring now particularly to matters of nuisance) combine these two characteristics precisely as does the case of assault which I have cited; but if the former, namely, the injury existing or threatened to the public, is absent from the situation complained of, then the health officer as a public official of the State, is quite as powerless as any other individual. But when we cross this line and find a condition involving a wrong against the public, whether a private

wrong co-exists or not, then the power of the health officer becomes almost absolute. There is no officer, federal, state or municipal, who, within the scope of his authority, is vested with such broad powers as the town health officer of a town in Connecticut, for the Statute specifically gives to him "all powers necessary and proper for the preservation of the public health." And the courts of the State have said in at least one conspicuous decision that when a health officer acts in good faith and with reasonable caution, he is not liable for an error of judgment in causing the removal as a nuisance, even if by so doing he causes a considerable injury to the property rights of others.*

All laws relating to public health are adopted and sustained under what is known as the police power,—that power to act for the general welfare which is inherent in the government, not only of the nation but of the states. It is a familiar form of phraseology that governments are constituted for the protection of the rights of the community to life, personal liberty and private property, which three rights are here named in the order of their importance as viewed by the law. Where rights of private property conflict with those of personal liberty the former must yield to the latter and the right of personal liberty must in turn give way for the protection of human life; and when we say human life, we include with it public health, because life and health are so interwoven that what threatens the latter threatens also the former.

I mention the breadth and absoluteness of the power of the health officer in Connecticut, when acting in good faith within the scope of his authority, for the purpose of reminding those whose public duties call for the exercise of this power that they are handling keen-edged tools, explosives of high force and great power and to remind them of the necessity for the use of a high degree of discretion and care that these weapons of great keenness may be used judiciously with a due regard to those rights which are guaranteed to every man; rights of personal liberty and private property which may not be wantonly interfered with. It is in pursuance of this idea that the Legislature of Connecticut, in establishing the present system of administration of laws pertaining to public health, did not deem

* *Raymond vs. Fish*, 51 Conn., 96.

it sufficient to provide that the officers into whose hands this power should be put in the several towns should be "persons learned in medical and sanitary science," but went further and provided that the appointees in the several towns should be also "discreet persons."

It is not my purpose to examine and discuss in detail the Statutes of this State, prescribing methods and limitations of such administration, but rather to call attention only to certain general features of the law as it stands to-day. In general terms it may be said that these powers of the health officer to which I have already made allusion, are powers of injunction rather than powers of mandamus. It is rather for the health officer to say "thou shalt not" than to say "thou shalt." This power of restraining the continuation of a nuisance may take any one of several forms, but in all it will be found, as a rule, that when the health officer goes beyond the limits of an injunction restraining the continuation of an existing condition, he oversteps the metes and bounds which have been set to his authority.

The power to establish and maintain a quarantine over a case of infectious disease may at first sight seem somewhat different from the power under which nuisances are abated, but careful consideration will show that no difference in principle exists even here, for an infected room, household or individual may be deemed, for the time being, a nuisance in the same sense that any other disease breeding conditions may be so held, and the same power of injunction to restrain the spread of the nuisance to other localities exists and is justified upon the same general principle. Another line of distinction which an administrator of public health laws must observe, is that it is not every nuisance or condition affecting the public which comes within his jurisdiction. As I have already indicated, unless a nuisance is public in its character, it is not one which calls for remedy by the public officer at State's expense; but, going still further, it is not every public nuisance which demands the attention of the health officer. It is not enough to be able properly to characterize a condition as a public nuisance in order to give the health officer power of abatement. It must partake of such a nature as to be prejudicial to public health before it comes within the scope of the police power

delegated to the health officer. To take an extreme case, an obstruction of the highway over which every citizen has a right to pass is a nuisance public in its character and one which the community as a whole, through its constituted authorities, may abate, but, because there is absent from it any menace to public health, it is a condition entirely outside the scope of the health officer's powers.

The question, therefore, which the health officer should ask himself whenever a condition is brought to his attention for abatement is, "is this a matter prejudicial to public health?" If he can answer that question in the affirmative, it is within his jurisdiction; if not, he is powerless. Many questions arise which lie very close to the boundary line and which demand a careful and discriminating consideration on the part of the health officer.

Let me illustrate by an actual case which was brought to my attention upon an appeal from the refusal of a town health officer to take jurisdiction of a condition complained of. A small stream running through the property of the complainant from land above him undoubtedly polluted by the overflow from a cesspool upon the adjoining property. This stream ran through meadows far from habitation, and was not used for water supply or ice. The complainant was undoubtedly injured by the pollution of the stream; his right to have the water come to him in its natural condition from the adjoining owner was undoubtedly invaded and the money value of his property was perhaps decreased; but the public health was not menaced; the wrong was against his individual rights and not against the rights of the public. His remedy, therefore, was personal, and the health officer had no jurisdiction because of his inability to find that the condition complained of constituted any menace to the public health. Recalling to your mind my illustration of the assault, his remedy corresponded to the private action which you might bring against me for the injury to you by the blow and not to the public remedy at the State's expense.

But it must be borne in mind that in drawing the line between nuisances prejudicial to public health and those without that class, the law is elastic. What would be held to affect the public health in one neighborhood might not be so held in another. The power to restrain the maintenance of a nuisance

in a thickly populated city would be much more liberally construed than in a sparsely settled rural community.

But, on the other hand, the question whether the public is affected by a nuisance cannot be determined by the number of people who suffer from the nuisance complained of. As I have said, there may be cases where the number of people has a determining influence upon the question of how far a health officer may go, but that cannot always be the safe criterion as instances may exist where danger to the single individual may constitute a public nuisance detrimental to public health. This line of distinction between a public and a private nuisance is one which cannot be sharply drawn so that one may see at a glance whether a particular condition is in the one class or the other. When, however, the condition affects one or more individuals in respect to rights which are theirs only in their capacity as members of the community, such condition, if it be a nuisance at all, becomes a public nuisance.

In what I have said, I have been speaking of the law generally. It must be borne in mind that there are powers and duties of health officers which are created by particular statutes. In cities, for example, the health officer is usually merely the executive officer of a board of health, whose powers are defined and circumscribed by the charter or the ordinances of the city. But even in a city, the powers of the Board of Health, although governed by the charter are construed in accordance with the general principles hereinbefore laid down, unless expressly restricted by legislative action.

REPORT ON THE INVESTIGATION OF RIVERS POLLUTION AND WATER SUPPLIES.

BY PROF. HERBERT E. SMITH, M.D., *Chemist of the Board.*

The investigation of rivers pollution and water supplies during 1900 has been under the general supervision of the chemist of the Board, working under the direction of a committee of the Board, consisting of the Secretary, Prof. C. A. Lindsley, and the President, Prof. William H. Brewer. In July, Dr. Parker, who had been associated with the chemist in the analytical work of the Board for six years, resigned his position to engage in another line of employment. He was succeeded by Frederick S. Hollis, Ph.D., in August. Dr. Hollis had been engaged for the past four years in expert work for the Metropolitan Water Board in Boston, Mass., and has occupied other positions which have thoroughly fitted him for sanitary examinations. As for several years past, microscopical work has been conducted by Mr. Harry A. Doty.

The work of the year has been pursued along the same line as in previous years, namely, it has consisted of regular chemical and microscopical examinations of certain public water supplies, and of chemical examinations of certain sewage polluted streams, and of the sewage and effluent of certain sewage purification plants in operation. In addition to these regular analyses, which are reported in the following pages, a considerable number of special examinations, chemical and microscopical, or bacteriological, have been made during the year by request of the officials of public water works, or by order of the County Health Officers. There have been during the year seventy-eight analyses of this class, which have been the subject of special reports made directly to the officers interested. This class of analyses has increased from year to year and constitutes a very valuable part of the laboratory work of the Board, for the samples sent by the health officers are in each case from sources suspected of being the cause of illness. They are chiefly from wells, which it would be difficult to learn of in any other way, and it is highly desirable that contaminated wells should be detected and closed throughout the State as promptly as possible.

Regular monthly analyses have been made from the public supplies of the following places: Branford, Milford, Norwalk,

Rockville, Stonington, Thompsonville, and Waterbury, Fenn Brook and Morris Brook supplies.

Bi-monthly examinations have been made of samples from Danbury, Padanaram reservoir and Kohanza reservoir; Kent; Manchester, distributing reservoir and storage reservoir; North Canaan; South Manchester, Porter reservoir and Taylor reservoir; and Stafford Springs.

The following table shows the averages of the chlorine determinations in the water supplies examined during the year. The averages for the year, and for the first half of the year and of the last half are given in each case in comparison with the probable average normal.

AVERAGES OF CHLORINE DETERMINATION, 1900.

Source.	Yearly Average.	First Six Months.	Last Six Months.	Average Normal.
Branford	4.49	4.55	4.45	4.
Danbury.*				
Kohanza	2.47	2.20	2.67	2.
Padanaram	1.95	2.13	1.78	2.
Kent*	1.56	1.53	1.60	1.6
Manchester.*				
Distributing	1.82	1.73	1.91	1.8
Storage	1.52	1.57	1.48	1.7
Milford	6.20	6.00	6.41	6.
North Canaan*	1.25	1.27	1.24	1.2
Norwalk	2.61	2.40	2.82	2.7
Rockville	1.42	1.38	1.44	1.4
South Manchester.*				
Porter	1.80	1.60	2.00	1.8
Taylor	1.68	1.57	1.79	1.8
Stafford Springs*	1.57	1.50	1.65	1.4
Stonington	4.70	4.37	5.03	---
Thompsonville	1.93	1.98	1.89	1.5
Waterbury.				
Fenn Brook	1.84	1.72	1.97	1.6
Morris Brook	2.37	2.22	2.54	1.5

During the latter part of the year, determinations of the alkalinity of the water samples have been made by titrating with a fiftieth-normal sulphuric acid solution with methyl-orange for an indicator. The alkalinity is expressed in terms of calcium carbonate. The results in milligrams per liter are shown in the following summary:

* Averages from bi-monthly samples.

ALKALINITY OF RESERVOIR AND RIVER WATERS.

Reservoir Waters.	Aug.	Sept.	Oct.	Nov.	Dec.	Ave.
Branford	58.0	55.0	61.0	57.0	58.8	57.8
Danbury, Kohanza	----	20.0	----	28.0	----	26.0
" Padanaram	----	18.0	----	21.0	----	19.5
Kent	----	56.0	----	67.0	----	61.5
Manchester, Distributing	----	12.0	----	12.2	----	12.0
" Storage	----	7.0	----	8.4	----	7.7
Milford	24.0	22.0	22.4	19.0	16.0	20.7
North Canaan	----	105.0	----	107.0	----	106.0
Norwalk	22.4	24.0	18.4	26.0	19.0	21.9
Rockville	9.0	6.0	6.6	8.0	9.0	7.7
South Manchester, Porter	----	15.0	----	18.0	----	16.5
" Taylor	----	11.0	----	14.4	----	12.7
Stafford Springs	----	11.0	----	10.0	----	10.5
Stonington	14.0	15.0	12.0	15.0	15.0	14.2
Thompsonville	46.0	42.0	44.0	44.0	46.0	44.4
Waterbury, Fenn Brook	22.0	24.0	26.4	10.0	6.0	17.6
" Morris Brook	24.0	27.0	25.0	16.0	10.0	20.4
River Waters.						
Housatonic River.						
Falls Village	101.0	85.0	134.0	100.0	59.0	95.8
Derby	92.0	89.0	90.0	70.0	43.0	76.8
Hockanum River.						
Windemere	16.0	12.0	10.0	----	----	12.7
Manchester	22.0	23.0	26.4	----	----	23.8
Burnside	33.0	35.0	34.0	----	----	34.0

The question of a pure water supply is of fundamental sanitary importance, as has been emphasized by the droughts which have occurred in different sections of the State at times during the past few years. The extensive use of bottled waters for table use is an expression of the distrust of our citizens in the public supplies. Without doubt every reasonable effort should be made to induce those having charge of our public water supplies to exercise great diligence in removing causes of contamination on their watersheds, and to improve their storage reservoirs. Doubtless frequent analyses of the supplies furnished and the publication of the results is one of the most potent means of stimulating improvements. It is to be regretted that the number that can be examined each year is so small, for it is highly desirable to have frequent examinations of all of the supplies. If this could be done for a few years, and a comparative table of the different supplies published each year, it would surely effect a great improvement.

In the last report the desirability of the examination of the table waters sold in the State was commented on. Such an investigation was carried out during the past summer under the provision made for the examination of foods, and a statement of the results may be found in the Fifth Report on Foods, 1900, by the Connecticut Agricultural Experiment Station.

Much interest has centered during the past few years on the purity of our ice supplies. The increasing consumption of this material by our people, and the difficulty of finding suitable sources from which to cut it, has resulted in the cutting of ice from ponds and from other sources which are not free from sewage contamination. Just what effect this has had on the quality of the ice sold, is a matter of much importance and is quite worthy of a thorough investigation.

Analyses of water made from rivers not used for drinking supplies, were made on samples taken monthly throughout the year at two stations on the Housatonic river, namely, at Falls Village and Derby; and on samples taken monthly from June to October inclusive, from three stations on the Hockanum river, namely, at Windemere, a short distance below Rockville, and at North Manchester and Burnside. No analyses had previously been published of examinations of the water of the Housatonic river. They are of special interest, therefore, as the river flows through the only considerable limestone district in our State, and because it is subject to considerable sewage contamination in Massachusetts. Analyses have previously been made from the same stations on the Hockanum river. Those of this year are of special interest, as since the last analyses Rockville has constructed a sewerage system removing the sewage, which was formerly discharged directly into the river in its passage through the city, and carrying it to a point further down the stream. At South Manchester the sewage which formerly entered the river through the South Branch is now disposed of upon the new filter beds, but these were not in operation much of the time during which samples were taken.

It was proposed at the beginning of the year to make a series of accurate determinations of the character of the sewage and effluent at the sewage disposal plant which has been recently established at the Springside Home at New Haven. It was hoped that the conditions would be favorable to test the efficiency

of this method of sewage disposal from the chemical standpoint. It was found, however, that the beds were somewhat overtaxed and the analyses were continued for the purpose of testing the efficiency of the beds with the object in view for which they were designed, namely, to prevent the gross pollution of the stream into which the sewage of the farm had previously been discharged. The report of the analyses has been prepared by Dr. Hollis.

The experience of the year leads the writer to repeat the observations concerning purification works which was made in the report of a year ago. All such works require careful attention on the part of those having charge of them to secure satisfactory results, and it is highly desirable that they should all be kept under the observation of the State Board of Health, or of the State Sewerage Commission. One of these boards should be charged with the duty of having the beds inspected from time to time and the efficiency of their operation tested by analyses of the effluent.

RAINFALL FOR THE YEAR 1900.

The tables showing the precipitation in various parts of the State have been compiled from the monthly bulletins of the New England Weather Service, published by the United States Department of Agriculture.

The records show that with the exception of the months of February, March, May and November, the precipitation was generally below the normal, and this was especially so in the hot months, July and August. The total precipitation for the year was, however, not greatly deficient except along the southern border of the State. At New Haven the deficiency was the greatest of any observed locality in New England. The departures from the normal at long established stations were as follows: Canton + 2.11 inches; New London - 10.30 inches; Voluntown - 2.55 inches; Southington + 0.98 inch; Waterbury - 1.01 inches; New Haven - 12.28 inches; North Grosvenordale + 9.11 inches.

MONTHLY AND ANNUAL PRECIPITATION IN INCHES AT CONNECTICUT STATIONS FOR THE YEAR 1900.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Canton	3.52	9.11	5.66	1.64	6.05	3.81	4.65	2.55	2.56	4.15	6.33	2.60	52.63
Colchester	4.26	9.68	6.26	1.94	3.93	1.80	2.43	.86	2.48	3.92	6.78	2.17	46.51
Cream Hill	2.82	5.97	3.84	1.95	5.13	4.42	6.09	2.18	1.75	2.73	5.29	3.00	45.17
Hartford	4.34	9.70	6.91	1.83	5.41	3.64	4.83	2.65	1.72	2.84	5.12	3.13	52.12
Hawleyville ...	3.68	9.03	5.95	1.90	5.98	4.31	3.02	2.62	3.00	4.25	6.82	2.87	53.43
Middletown	4.19	8.91	6.27	2.39	3.62	2.08	2.92	1.89	2.75	3.82	6.88	2.78	48.50
New Haven	3.60	6.39	4.21	1.95	3.30	1.79	2.28	.90	2.10	2.03	4.14	2.14	34.83
New London ..	4.25	4.72	4.25	2.07	4.84	1.90	1.46	.89	4.03	1.59	5.15	1.86	37.01
N. Grosvenor													
Dale	5.04	7.72	6.53	2.75	5.84	3.66	4.16	1.57	2.09	4.10	6.30	2.46	52.22
Norwalk	4.11	5.74	4.08	1.95	3.62	2.03	4.30	2.25	3.44	3.47	4.92	2.54	42.45
Southington ...	3.35	7.70	5.80	1.60	5.15	3.13	2.70	1.90	2.20	2.95	5.70	2.45	44.63
Storrs	3.42	7.31	6.73	2.67	4.91	4.32	2.76	2.03	2.27	3.00	6.79	2.22	48.43
Voluntown	4.80	8.06	6.78	2.43	4.48	2.23	2.58	2.00	3.10	2.80	6.63	2.71	48.60
Waterbury	3.77	8.46	5.51	2.23	4.39	3.02	3.10	2.09	2.15	3.59	5.96	2.56	46.83
Average	3.94	7.75	5.63	2.09	4.76	3.01	3.38	1.88	2.55	3.23	5.91	2.53	46.67

THE BRANFORD WATER SUPPLY.

The population of the town of Branford is 5,706, but the water is supplied only in the village and at Pine Orchard.

The works were constructed by the Branford Lighting and Water Company in 1898-99. The supply is surface water impounded in Beaver reservoir. This reservoir is fed by Farm river, the outlet of Twin Lakes in North Branford, and is situated about one mile northeast of Branford. It has an area of about two acres, is only moderately deep and has about one-fourth of shallow flowage. The bottom is largely gravel and the surface loam was removed when the reservoir was built. The watershed is hilly and mostly woodland and pasture, with some cultivated fields. The water is pumped into the Maple Hill distributing reservoir, which has an area of 29,450 square feet at water line and an average depth of 14 feet.

There are about 11 miles of distributing mains. It is estimated that the water is used by eight hundred persons and that the average daily consumption per capita is 137.5 gallons.

Samples have been furnished monthly through the year by Mr. F. H. Golding, Superintendent of the company.

BRANFORD. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not Filtered.	Albuminoid Ammonia, Not Filtered.	Nitrites.	Nitrates.		
2486	Jan. 23	Slight	Small	0.5	68.0	48.0	20.0	4.60	0.056	0.328	0.002	0.15	19.	7.65
2503	Feb. 8	Distinct	Very scanty	.5	78.0	58.0	20.0	4.00	.050	.268	.002	.05	17.	5.75
2533	Mar. 7	Clear	"	.3	59.0	45.0	14.0	3.50	.018	.122	.012	.08	20.	5.00
2549	Apr. 5	Slight	"	.3	60.0	47.0	13.0	6.30	.024	.138	.006	.13	20.	3.10
2567	May 2	Distinct	Small	.4	75.0	59.0	16.0	4.40	.042	.164	.000	.10	30.	4.65
2590	June 1	Slight	Very scanty	.4	70.0	55.5	14.5	4.50	.042	.160	.002	.15	25.	4.70
2613	July 2	Clear	"	.2	91.5	75.5	16.0	3.90	.026	.160	.000	.05	40.	4.00
2658	Aug. 8	Slight	"	.3	87.5	72.5	15.0	4.62	.016	.202	.000	.08	37.	5.80
2691	Sept. 5	Distinct	"	.2	93.5	69.5	24.0	4.10	.004	.178	.008	.03	40.	3.75
2729	Oct. 2	Slight	"	.1	98.5	77.0	21.5	4.34	.000	.226	.000	.06	39.	3.50
2750	Nov. 1	"	Moderate	.2	91.5	75.5	16.0	4.70	.004	.184	.004	.06	35.	3.20
2783	Dec. 5	V'y sl'gt	Very scanty	.2	88.0	66.5	21.5	4.96	.006	.248	.000	.12	37.	3.30
			Average	.3	80.0	62.4	17.6	4.49	.024	.198	.0030	.09	30.	4.53

REMARKS.—The odor was described as none or slight, mouldy.

BRANFORD. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
DIATOMACEÆ—												
Synedra	2	16	18	60	976	6	2	6	2	8	4	28
Melosira	4	24	34	16	166		4		10			
Tabellaria	*											
Asterionella		8	20	100	196	6		42				
Cyclotella		4	4		6	44	12	34	2			
Meridion			4									
Navicula			2								4	
Nitzschia							2					
Eunotia												2
DESMIDIACEÆ—												
Xanthidium					2							
Euastrum							2					
Staurastrum								4				
PROTOCOCCOIDÆ—												
Raphidium		6		6	26					2	8	
Scenedesmus			8	8	44						4	
Dacetylucoccus						40						
Pediastrum							2					
Polyedrium												
Green cells unident- ified		22	2				170	432			64	16
CYANOPHYCEÆ—												
Tetraspora				24		106			2816	246		
Microcystis										38		
CONFERVACEÆ—												
Conferva											2	
FUNGI—												
Crenothrix	6		2									
Beggiatoa		18	4									
Leptothrix			6									
PROTOZOA—												
Mallomonas	2	52										
Glenodinium	2	6							2			
Synura		200										
Dinobryon		58	6	54	4	20	6	2				2
Trachelomonas			2					2	2	2		
Peridinium				2				8	2			
Tintinnus					*							
Ceratium								6	2			
Amœba									2			
Infusoria unidenti- fied		8	2									
ROTIFERA—												
Anurea									2			
Conochilus								2				
ENTOMOSTRACA										*		
SPORES			2								14	
ZOOGLÆA											2	
OVA							2					

SUMMARY.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Diatomaceæ	6	52	82	176	1344	54	20	82	14	8	8	30
Desmidiaceæ					2		2	4				
Protococcoideæ		28	10	14	70	40	172	432		2	76	16
Cyanophyceæ				24		106			2816	284		
Confervaceæ											2	
Fungi	6	18	12									
Protozoa	4	324	10	56	4	20	6	16	10	2	2	2
Rotifera								2	2			
Entomostraca										*		
Spores			2								14	
Zoöglæa											2	
Ova							2					

ANALYSES OF DANBURY WATER SUPPLY.

A description of the Danbury water supply was published in the Annual Report for 1896, page 350.

During the present year samples have been taken every other month from the Kohanza and the Padanaram supplies. They were furnished by Mr. W. B. Blackman, Superintendent of the water works, and were taken from taps connected with the mains just inside the city limits.

DANBURY—KOHANZA SUPPLY. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2484	Jan. 21	Slight	Scanty	0.3	57.0	47.0	10.0	3.10	0.042	0.182	0.004	0.02	20.	4.05
2543	Mar. 27	"	Very scanty	.2	38.5	30.5	8.0	1.70	.022	.152	.004	.04	10.	3.05
2575	May 10	Clear	"	.2	41.0	33.0	8.0	1.80	.010	.140	.002	.10	12.	4.10
2617	July 2	"	Scanty	.3	50.5	40.5	10.0	2.30	.010	.098	.000	.05	14.	2.90
2708	Sept. 13	Distinct	"	.4	44.5	30.0	14.5	2.26	.030	.140	.000	.05	14.	2.35
2763	Nov. 8	Marked	Much	.6	81.0	60.5	20.5	3.46	.014	.238	.004	.07	20.	4.80
			Average	.3	52.0	40.2	11.8	2.47	.021	.158	.0023	.05	15.	3.54

REMARKS.—The odor was described as slight or distinct, mouldy, in January, July, September and November.

DANBURY—KOHANZA SUPPLY. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Melosira	170	46	2465	18	202	870
Synedra	168	68	200	—	272	55
Nitzschia	52	10	15	—	2	—
Navicula	2	2	20	4	6	20
Asterionella	42	28	485	14	—	—
Meridion	—	2	—	—	—	—
Encyonema	—	—	15	—	—	5
Cyclotella	—	—	4	58	—	5
Tabellaria	—	—	5	—	—	5
Gomphonema	—	—	—	2	—	5
Epithemia	—	—	—	—	2	—
Amphora	—	—	—	—	—	5
DESMIDIACEÆ—						
Enastrum	—	—	—	4	—	—
Staurostrum	—	—	—	—	16	5
PROTOCOCCOIDEÆ—						
Scenedesmus	72	16	110	44	152	20
Raphidium	6	94	60	2	—	—
Polyedrium	—	—	—	4	—	—
Green cells unidentified	4	22	—	38	232	—
CYANOPHYCEÆ—						
Tetraspora	—	20	—	—	—	—
Anabæna	—	—	—	—	284	—
Oscillaria	—	—	—	—	6	5
Cælosphærium	—	—	—	—	8	—
PROTOZOA—						
Dinobryon	52	4	135	88	—	—
Peridinium	8	14	—	—	2	*
Trachelomonas	6	—	—	—	44	60
Chlorogonium	—	4	—	—	—	—
Glenodinium	—	—	10	—	—	—
Mallomonas	—	—	5	—	—	—
Tintinnus	—	—	—	—	—	5
Synura	—	—	—	—	—	5
Infusoria unidentified	—	44	—	—	2	—
ROTIFERA—						
Anurea	2	—	—	—	2	—
Unidentified	—	—	—	—	2	—
ZOOGLÆA	2	—	—	—	—	—

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	434	156	3205	96	484	970
Desmidiaceæ				4	16	5
Protococcoideæ	82	132	170	88	384	20
Cyanophyceæ					298	5
Protozoa	66	66	150	88	48	70
Rotifera	2				4	
Zoöglæa	2					

DANBURY—PADANARAM SUPPLY. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million,

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			NITROGEN OF						Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	Hardness as CaCO ₃ .	
2485	Jan. 21	Slight	Small	0.4	51.0	36.0	15.0	2.60	0.040	0.160	0.004	0.10	18.	4.55
2544	Mar. 27	"	Very scanty	.3	37.0	29.0	8.0	1.90	.036	.114	.004	.10	10.	3.10
2576	May 10	Clear	Small	.3	41.5	33.0	8.5	1.90	.018	.122	.001	.10	10.	4.30
2618	July 2	Slight	Scanty	.3	54.5	45.5	9.0	1.90	.038	.190	.001	.05	13.	3.35
2707	Sept. 13	Moderate	Much	.3	45.5	28.5	17.0	1.38	.038	.176	.002	.04	14.	2.80
2762	Nov. 8	Marked	"	.4	57.0	42.0	15.0	2.06	.012	.210	.006	.15	13.	3.60
			Average	.3	47.7	35.6	12.1	1.95	.030	.162	.0030	.09	13.	3.61

REMARKS.—The odor was described as distinct, mouldy or vegetable in July, September and November. A special sample on November 20, had a very marked fish-oil odor, due to a large number of *Uroglena*; on standing the sample became offensive, putrefactive.

DANBURY—PADANARAM SUPPLY. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov
DIATOMACEÆ—						
Asterionella	10	8	32	4	10	10
Navicula	8	4	20	10	8	45
Tabellaria	48	4	140	6	3	15
Melosira	46	10	268	22	336	925
Synedra	2	10	84	8	138	45
Meridion		26		2		
Nitzschia		10	2			
Ceratoneis		2				
Eunotia		2		*	2	
Gomphonema		4				5
Encyonema			8			5
Cyclotella				8	2	
Fragilaria				10	46	
Surirella					2	
Amphora					6	
DESMIDIACEÆ—						
Staurostrum	4				40	
PROTOCOCCOIDEÆ—						
Raphidium		30	4	4		
Scenedesmus			8	*	16	40
Pediastrum			*			5
Green cells unidentified			10	36	482	
CYANOPHYCEÆ—						
Cœlosphaerium	4		2	*	10	
Tetraspora		16				
Oscillaria			2		2	
Nostoc				2		
Anabæna					142	
FUNGI—					2	
PROTOZOA—						
Peridinium	2	26			2	
Trachelomonas	4		*	4	2	25
Dinobryon		84	378	236		
Tintinnus				2	*	10
Mallomonas				12	2	
Coleps					2	
Infusoria unidentified		4				15
ROTIFERA—						
Anurea			2		2	
Unidentified				*		
ENTOMOSTRACA—					*	
SPORES—		10				
OVA—				2		

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	114	80	554	70	553	1050
Desmidiaceæ	4				40	
Protococcoideæ		30	22	40	498	45
Cyanophyceæ	4	16	4	2	154	
Fungi					2	
Protozoa	6	114	378	254	8	50
Rotifera			2	*	2	
Entomostraca					*	
Spores		10				
Ova				2		

ANALYSES OF KENT WATER SUPPLY.

A description of the Kent water supply was published in the Annual Report for 1896, page 356.

During the present year samples have been furnished every other month by Mr. C. A. Eaton, Secretary of the Kent Water Co., the samples being taken from a faucet in the village.

KENT. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100°C.	Non-Volatile, Mineral.	Volatile Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2491	Jan. 24	Clear	None	0.2	50.0	36.0	14.0	1.90	0.012	0.094	0.001	0.10	27.	2.80
2542	Mar. 22	"	Very scanty	.2	46.5	41.5	5.0	1.20	.006	.070	.000	.10	23.	1.70
2570	May 10	"	None	.0	48.0	43.0	5.0	1.50	.012	.042	.000	.08	34.	1.20
2616	July 2	Slight	Scanty	.0	72.0	64.0	8.0	1.90	.012	.050	.000	.10	30.	2.20
2706	Sept. 13	Clear	None	.2	76.5	60.0	16.5	1.04	.004	.102	.000	.16	32.	1.85
2754	Nov. 7	"	"	.2	94.0	79.0	15.0	1.86	.002	.120	.000	.18	35.	3.20
			Average	.1	64.5	53.9	10.6	1.56	.008	.080	.0001	.12	30.	2.16

REMARKS.—The odor was described as slightly mouldy in September, and slightly aromatic in November, and as none in the other samples.

WATER SUPPLY OF MANCHESTER.

The works are owned by the Manchester Water Company, and were begun in 1889. A perpetual charter was granted the company. The estimated population supplied is 2,000. The consumption is unknown.

The supply is surface water impounded in three reservoirs, which are supplied by brooks from Bolton mountain. The lowest reservoir is used as the distributing reservoir, and is about $2\frac{1}{2}$ miles from the village. It has an area of about 2 acres. Just above this is a storage reservoir, with an area of 6 acres, and an average depth of 6 feet.

The third reservoir has an area of about 22 acres and a depth of 15 feet. It was constructed as a storage reservoir for manufacturing purposes many years ago. The watershed is hilly, and about half woodland; the remainder is mostly pasture land, with but little cultivated land. The total length of mains is 11 miles.

Samples have been furnished every other month from the distributing and smaller storage reservoir, by Mr. J. A. Fitch, Superintendent of the works.

MANCHESTER—STORAGE RESERVOIR. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF				Hardness at CaCO_3 .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100°C .	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia. Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2500	Jan. 29	Slight	Very scanty	0.2	32.5	20.0	12.5	1.80	0.022	0.126	0.001	0.10	5.	2.55
2536	Mar. 14	"	"	.2	29.0	20.0	9.0	1.30	.008	.100	.000	.08	3.	3.35
2572	May 10	Clear	Small	.2	31.5	21.5	10.0	1.60	.016	.108	.002	.05	5.	3.60
2619	July 3	Slight	Very scanty	.2	38.5	29.0	9.5	1.80	.008	.116	.000	.05	3.	3.70
2704	Sept. 13	Distinct	Much	.4	31.0	17.5	13.5	1.18	.034	.176	.000	.02	3.	2.90
2755	Nov. 7	Marked	"	.2	43.5	26.0	17.5	1.46	.004	.250	.006	.07	5.	3.90
			Average	.2	34.3	22.3	12.0	1.52	.015	.146	.0015	.06	4.	3.33

REMARKS.—The odor was described as slight vegetable or mouldy in July, September and November, and none in the others.

MANCHESTER—DISTRIBUTING RESERVOIR. CHEMICAL EXAMINATION,
1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			NITROGEN OF					Hardness at CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2501	Jan. 29	Slight	Very scanty	0.2	32.0	22.0	10.0	1.70	0.024	0.126	0.001	0.15	5.	2.15
2537	Mar. 14	"	"	.2	45.5	33.5	12.0	1.70	.012	.092	.002	.15	3.	2.10
2573	May 10	Clear	Small	.2	37.5	27.5	10.0	1.80	.008	.098	.002	.02	5.	3.00
2620	July 3	"	Scanty	.3	38.5	28.0	10.5	2.10	.014	.118	.002	.15	4.	3.10
2703	Sept. 13	Distinct	Moderate	.5	42.5	31.5	11.0	1.90	.024	.106	.002	.12	6.	1.60
2756	Nov. 7	Mod'ate	"	.4	45.0	33.5	11.5	1.74	.028	.094	.004	.09	9.	2.60
			Average	.3	40.1	29.3	10.8	1.82	.018	.105	.0021	.11	5.	2.42

REMARKS.—The odor was described as slight vegetable or mouldy in July, September and November, and as none in the others.

MANCHESTER—STORAGE. MICROSCOPICAL EXAMINATION,
1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Nitzschia	4	6	4	—	5	14
Asterionella	44	4	22	—	50	42
Navicula	2	2	4	8	30	2
Synedra	6	—	4	4	10	16
Melosira	—	—	32	6	405	46
Eunotia	—	—	4	2	—	—
Cyclotella	—	—	16	4	100	122
Tabellaria	—	—	10	—	20	16
Meridion	—	—	2	—	—	—
Encyonema	—	—	—	—	10	—
Gomphonema	—	—	—	—	—	2
DESMIDIACEÆ—						
Sphærozozma	—	—	*	—	—	—
Staurastrum	—	—	—	—	5	—
Euastrum	—	—	—	—	—	2
PROTOCOCCOIDEÆ—						
" 775 "	18	—	4	—	—	104
Scenedesmus	8	—	8	—	—	40
Raphidium	4	2	28	—	—	6
Green cells unidentified	—	8	—	2	260	—
CONFERVACEÆ—						
Conferva	—	—	—	—	10	—
CYANOPHYCEÆ—						
Anabæna	—	—	—	—	—	*
PROTOZOA—						
Dinobryon	28	76	18	—	—	4
Glenodinium	*	—	—	—	—	—
Mallomonas	—	—	72	6	—	10
Tintinnus	—	—	4	—	—	—
Vorticella	—	—	—	2	—	—
Volvox	—	—	—	—	*	—
Euglypha	—	—	—	—	—	2
Phacus	—	—	—	—	—	2
Infusoria unidentified	2	4	—	—	—	—
ROTIFERA	—	—	—	2	—	—
ENTOMOSTRACA	—	—	—	—	—	*
OVA	—	—	—	—	5	—

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	56	12	68	24	630	260
Desmidiaceæ	—	—	*	—	5	2
Protococcoidæ	30	10	40	2	260	150
Confervaceæ	—	—	—	—	10	—
Cyanophyceæ	—	—	—	—	—	*
Protozoa	30	80	94	8	*	18
Rotifera	—	—	—	2	—	—
Entomostraca	—	—	—	—	—	*
Ova	—	—	—	—	5	—

MANCHESTER—DISTRIBUTING. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Synedra	22	6	56	6	85	12
Meridion	10		6	2		
Eunotia	4		2	4		
Gomphonema	2	6	8		15	8
Navicula	10	14	22	36	40	38
Nitzschia	2				5	
Melosira	6		20	20	60	34
Asterionella	8			2	5	6
Cyclotella	2					
Cocconeis		2		2		
Tabellaria		2		2	*	2
Odontidium			4	8	10	
Amphora			2	2		
Surirella			2		*	
Cocconema			2			2
Fragilaria				4		
Encyonema				10	15	
Himantidium						20
DESMIDIACEÆ—						
Euastrum					5	
PROTOCOCCOIDEÆ—						
Scenedesmus	8		8	16	20	
Raphidium		2				
Green cells unidentified			56			
CONFERVACEÆ—						
Conferva					5	
FUNGI—						
Leptothrix						2
Unidentified			4			
PROTOZOA—						
Dinobryon		2				
Mallomonas			12			
Tintinnus			*			
Infusoria unidentified		4			30	
SPORES	2					2

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	66	30	124	98	235	122
Desmidiaceæ					5	
Protoccoidææ	8	2	64	16	20	
Confervaceæ					5	
Fungi			4			2
Protozoa		6	12		30	
Spores	2					2

ANALYSES OF MILFORD WATER SUPPLY.

Population of the town of Milford in 1900, 3,783. Water is supplied in the village of Milford, and in the summer resorts, Woodmont and Laurel Beach. It is estimated that about 2,000 persons are supplied, and that the average daily consumption is 100,000 gallons. The works are owned by the Milford Water Company, and were begun in 1898. The supply consists of an artificial reservoir situated about one mile southwest of the village and made by damming Beaver Brook. The reservoir has an area of 11 acres, and a depth of 6 feet with much shallow flowage. The surface soil was partially removed, and there is but little vegetable growth.

Beaver Brook originates in a large spring in a swampy tract, about a mile and a half above the reservoir. Its watershed is hilly and contains considerable cultivated land. Water is pumped by steam power to a stand pipe 100 feet high and 20 feet in diameter. Its capacity is about 230,000 gallons.

Samples for analysis have been furnished monthly during the year by Mr. Moses Joy, President of the company, and were taken from a tap at Barnes' drug store in Milford.

MILFORD. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.					NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	Hardness as CaCO ₃ .	
2497	Jan. 25	Distinct	Scanty	0.6	65.0	44.0	21.0	8.10	0.040	0.140	0.006	0.30	15.	4.75
2507	Feb. 8	Slight	Very scanty	.6	60.0	48.5	11.5	6.70	.030	.114	.002	.25	14.	5.10
2545	Mar. 30	Clear	"	.4	44.5	34.5	10.0	5.30	.024	.092	.004	.15	10.	3.40
2556	Apr. 27	V'y sl'gt	"	.6	57.0	42.0	15.0	5.30	.020	.122	.002	.25	15.	5.95
2582	May 19	Slight	None	.5	53.0	37.0	16.0	5.30	.034	.110	.002	.20	15.	5.00
2594	June 5	"	Moderate	.6	56.0	39.0	17.0	5.30	.018	.156	.000	.08	13.	5.60
2621	July 3	"	Very scanty	.5	56.5	41.5	15.0	5.90	.022	.118	.001	.20	13.	3.45
2656	Aug. 8	"	Scanty	.4	55.5	43.5	12.0	6.06	.030	.170	.000	.22	20.5	4.75
2699	Sept. 12	Mod'ate	Moderate	.5	60.0	36.5	23.5	6.10	.050	.194	.030	.03	13.	3.70
2733	Oct. 3	"	Much	.4	69.0	47.0	22.0	6.70	.038	.218	.001	.06	11.	4.20
2752	Nov. 2	Distinct	None	.3	56.0	44.0	12.0	6.50	.068	.140	.004	.09	13.	3.60
2777	Dec. 3	"	Scanty	1.0	81.5	54.0	27.5	7.20	.042	.264	.004	.10	16.	9.00
Average				.5	59.5	42.6	16.9	6.20	.035	.153	.0047	.16	14.0	4.87

REMARKS.—The odor was described as marked in December, slight, mouldy, vegetable or none in the other samples.

MILFORD. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Feb.	Mar.	Apr.	May.	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
DIATOMACEÆ—												
Tabellaria	2		11			15					8	
Synedra		1	3	4	2		2	4	10	98	40	22
Meridion			1									
Navicula						15	2				2	2
Cyclotella						10	10			2		4
Fragilaria						75						
Melosira							14					
Eunotia							2					
Gomphonema								2				
DESMIDIACEÆ—												
Closterium			*									
Staurostrum								14	5			
Cosmarium								2				
PROTOCOCCOIDEÆ—												
Scenedesmus				4						4	16	
Raphidium							40					2
Pediastrum								2				
Green cells unident- ified								20				
CYANOPHYCEÆ—												
Tetraspora									450			
FUNGI—												
Crenothrix				1		20						
PROTOZOA—												
Dinobryon	2	2	*				96	2	5	6	14	14
Synura				1								4
Trachelomonas										2		
Glenodinium								6			2	
Infusoria unidenti- fied						5				4		
ROTIFERA—												
Anurea										*	2	
ENTOMOSTRACA	*											
SPORES		1										
ZOOGLÆA	*											

SUMMARY.

	Jan.	Feb.	Mar.	Apr.	May.	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Diatomaceæ	2	1	15	4	2	115	30	6	10	100	50	28
Desmidiaceæ			*					16	5			
Protococcoidææ				4			40	22		4	16	2
Cyanophyceæ									450			
Fungi				1		20						
Protozoa	2	2	*	1		10	96	8	5	12	16	18
Rotifera										*	2	
Entomostraca	*											
Spores		1										
Zoöglæa	*											

THE NIAN TIC CAMP WATER SUPPLY.

Previous to the annual encampment of 1899, the water supply of the State Camp Grounds at Niantic was derived from a number of driven wells at different points within the grounds. In 1900 this supply was discontinued and water was piped into the camp from two new wells situated on the further side of the rifle range. These wells are six inches in diameter and about 100 feet deep. They were sunk through gravel and sand. A layer of gravel twenty-eight or twenty-nine feet deep was first penetrated; then there was a layer of fine sand, which was described as being almost of the nature of quicksand. This reached to a depth of about sixty feet; then there was a layer of coarser sand from which the water is taken. The wells did not penetrate any clay beds or any real hardpan.

The water from these pipe wells is lifted by apparatus furnished by the Bacon Air Lift Co. By this apparatus air compressed by two air pumps is forced to the bottom of the wells and forces the water up from the wells into a cement-lined underground reservoir, which is about eight feet square and eight feet deep. From this the water is pumped into the distributing pipes by the use of two water pumps. In raising the water, from eighty to one hundred cubic feet of air are used per hour, at a pressure of about twenty-five pounds. About 150 to 160 thousand gallons of water were pumped daily during the encampment of 1899. A pressure of about forty pounds is maintained on the distribution mains.

A sample of water was taken on August 15th, 1900, just prior to the beginning of the encampment. It was collected by the Chemist of the Board from the pumps after they had been working for about one day. A bacteriological culture on gelatine at the ordinary temperature showed an average of forty-two colonies per c.c. A culture on lactose litmus agar showed no acid-producing forms.

WATER SUPPLY. NIAHTIC, CAMP GROUNDS.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	RESIDUE ON EVAPORATION.			NITROGEN OF					Hardness as CaCO ₃ g.	Oxygen Consumed.
		Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2672	Aug. 15.	63.5	55.5	8.0	8.30	.008	.006	.032	.38	21.	.65

REMARKS.—The sample was distinctly turbid and contained a considerable sediment of sand; it was nearly colorless.

ANALYSES OF NORTH CANAAN WATER SUPPLY.

A description of the North Canaan water supply was published in the Annual Report for 1896, page 366.

During the present year samples have been furnished every other month from a tap in the village. Those of January and March were collected by Mr. Samuel A. Eddy, and the others by Mr. J. E. Rhoades, Superintendent of the North Canaan Water Co.

NORTH CANAAN. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.				NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	
2502	Jan. 31	Clear	None	0.0	110.5	103.5	7.0	1.20	0.006	0.014	0.000	0.10	100.
2546	Mar. 31	"	"	.0	118.0	112.0	6.0	1.00	.014	.016	.000	.04	115.
2571	May 10	"	Very small	.0	90.0	84.0	6.0	1.60	.002	.016	.001	.05	105.
2622	July 3	"	Very scanty	.0	110.0	104.5	5.5	1.30	.006	.028	.000	.05	105.
2705	Sept. 13	Slight	Small	.1	120.5	111.0	9.5	1.02	.000	.086	.002	.06	74.
2759	Nov. 7	Clear	None	.0	121.0	113.5	7.5	1.40	.000	.020	.000	.05	61.
Average				.02	111.6	104.7	6.9	1.25	.004	.030	.0005	.05	93.

REMARKS.—The odor was described as slight, aromatic in the September sample, and as none in the others.

ANALYSES OF NORWALK WATER SUPPLY.

A description of the Norwalk water supply was published in the Annual Report for 1896, page 367.

During the present year samples have been furnished monthly by Mr. James Roach, Superintendent of the Norwalk Water Co. The samples were taken from a tap in the city in May, June, July, September and December, and from the distributing reservoir at other times. The reservoir was very low during the last of the year.

NORWALK—CHEMICAL EXAMINATION. YEARLY AVERAGES, 1894 AND 1900.

Figures indicate Milligrams per Liter or Parts per Million.

Date.	Color.	RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
		Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
1894	.5	48.1	35.0	13.1	2.66	.025	.221	.0004	.05	17.	5.33
1900	.5	49.9	34.9	15.0	2.61	.067	.242	.0030	.09	14.	5.61

NORWALK—CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2492	Jan. 24	Slight	Scanty	0.5	48.0	27.0	21.0	3.00	0.020	0.166	0.003	0.13	13.	6.25
2509	Feb. 8	Distinct	Small	.5	34.0	24.0	10.0	2.20	.012	.130	.003	.10	7.	5.85
2530	Mar. 7	Clear	None	.3	36.0	25.0	11.0	2.70	.030	.090	.003	.08	9.	3.90
2552	Apr. 5	"	Very scanty	.3	28.0	21.0	7.0	2.40	.016	.128	.000	.13	8.	3.30
2564	May 3	"	"	.4	43.0	31.5	11.5	2.20	.032	.122	.002	.04	13.	5.55
2591	June 1	"	None	.6	44.0	33.0	11.0	1.90	.036	.416	.000	.10	15.	5.65
2615	July 2	Marked	Much	.6	72.0	54.0	18.0	2.00	.018	.290	.000	.02	20.	7.00
2655	Aug. 8	"	Moderate	.6	52.5	44.5	8.0	2.50	.080	.280	.003	.12	21.	5.95
2689	Sept. 5	"	Much	.5	61.5	33.5	28.0	2.46	.394	.542	.010	.09	19.	6.95
2740	Oct. 11	"	"	.4	57.0	36.5	20.5	2.74	.150	.314	.010	.10	11.	4.50
2758	Nov. 8	Slight	Scanty	.4	64.0	49.0	15.0	4.20	.014	.196	.002	.07	11.	4.00
2785	Dec. 8	"	"	.7	59.5	40.5	19.0	3.06	.006	.234	.006	.13	19.	8.40
Average				.5	49.9	34.9	15.0	2.61	.067	.242	.0030	.09	14.	5.61

REMARKS.—The odor was described as distinct or marked vegetable or disagreeable in July, August and September. As none or slight in the other months.

NORWALK—MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
DIATOMACEÆ—												
Navicula	2	10		8	1		35	2		15	5	10
Synedra	8		6	16	4	2	20	8		60	120	45
Meridion	2	4	*		1						5	
Asterionella	2				4	2	35	2		20	10	5
Nitzschia	2	6			1		10	90		25	25	
Melosira	*			46	60	102	320	168	80	1085	1175	165
Tabellaria				14	28		10			5	5	5
Cyclotella							520	14	15	70	55	35
Fragilaria							20				10	
Gomphonema							5					
Cocconeis							5					
Amphora											5	
Encyonema											5	
Eunotia												5
DESMIDIACEÆ—												
Closterium				2								
Staurostrum				2				56	15	100	10	
Cosmarium								2				
PROTOCOCCOIDEÆ—												
Raphidium		2		2		4		16	5	105	110	
Pediastrum							5		10	30	5	
Scenedesmus							40		30	120	80	40
Polyedrium									5	15		
Dimorphococcus										40		
Green cells unident- ified									50	20		
CYANOPHYCEÆ—												
Anabaena								282	2835	520		
Tetraspora											100	
FUNGI—												
Leptothrix		4			*							
Crenothrix		2										
PROTOZOA—												
Dinobryon		4		36		4	10	18	210			
Mallomonas		2		2				18		35	5	
Trachelomonas						2			185	195	5	20
Glenodinium							10	30	5			
Tintinnus							*			5		
Eudorina									5	15		
Phacus									10	5		
Vorticella									5			
Euglypha												5
Dendromonas												10
Infusoria unidenti- fied	4	6			3					15	15	
VERMES—												
Anguillula				*								
SPORES												
2	2									25		5
ZOOGLCEA												
										115		

SUMMARY.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Diatomaceæ	16	20	6	84	99	106	980	284	95	1280	1420	270
Desmidiaceæ				4				58	15	100	10	
Protococcoideæ		2		2		4	45	16	100	330	195	40
Cyanophyceæ								282	2835	520	100	
Fungi		6			*							
Protozoa	4	12		38	3	6	20	66	420	270	25	35
Vermes				*								
Spores	2	2								25		5
Zoöglæa										115		

ANALYSES OF ROCKVILLE WATER SUPPLY.

A description of the Rockville water supply was published in the Annual Report for 1896, page 372.

During the present year samples have been furnished monthly by J. C. Hammond, Jr., Secretary and Treasurer of the Rockville Water and Aqueduct Co., the samples being taken from a tap at the office.

ROCKVILLE—SCHENIPSET LAKE. CHEMICAL EXAMINATIONS
YEARLY AVERAGES 1890-91 AND 1900.

Figures indicate Milligrams per Liter or parts per Million.

Date.	RESIDUE ON EVAPORATION.					NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
*1890-1891	.1	31.3	21.4	9.9	1.66	.027	.194	.0008	.05	7.	4.23
1900	.3	31.2	20.2	11.0	1.42	.021	.107	.0002	.07	5.	3.45

* Eleven months.

ROCKVILLE—SCHENIPSET LAKE. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.			
2487	Jan. 22	Slight	Very scanty	0.2	26.5	17.5	9.0	1.20	0.018	0.106	0.002	0.05	4.	2.65	
2504	Feb. 8	"	"	.2	32.0	21.0	11.0	1.70	.022	.106	.001	.02	4.	5.05	
2532	Mar. 7	Clear	"	.3	30.0	19.0	11.0	1.30	.032	.104	.010	.10	5.	4.00	
2551	Apr. 5	"	"	.3	31.0	23.0	8.0	1.50	.028	.096	.001	.10	4.	3.30	
2566	May 2	"	"	.3	29.0	18.0	11.0	1.30	.034	.096	.001	.10	5.	3.45	
2597	June 12	"	"	.4	30.0	18.0	12.0	1.30	.024	.110	.000	.08	5.	3.50	
2629	July 6	"	"	.3	28.0	18.0	10.0	1.50	.028	.090	.000	.02	8.	4.00	
2654	Aug. 8	Distinct	Small	.3	35.5	27.0	8.5	1.40	.018	.126	.001	.08	13.	4.40	
2688	Sept. 5	Slight	"	.4	32.0	16.5	15.5	1.50	.008	.110	.000	.05	5.	3.15	
2728	Oct. 2	"	Very scanty	.2	35.5	22.5	13.0	1.30	.008	.112	.000	.07	6.	2.95	
2749	Nov. 1	"	Small	.2	30.5	20.5	10.0	1.60	.010	.100	.006	.06	3.	2.50	
2776	Dec. 3	Distinct	"	.3	35.0	22.0	13.0	1.46	.026	.128	.002	.96	3.	2.50	
			Average	.3	31.2	20.2	11.0	1.42	.021	.107	.0002	.07	5.	3.45	

REMARKS.—The odor was described as distinct vegetable or mouldy in August and December, marked vegetable in September, and as slight or none in the other samples.

ROCKVILLE. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
DIATOMACEÆ—												
Asterionella	28	27	10	132	129	...	18	6	8	110	44	4
Melosira	32	9	12	22	49	...	30	28	12	62	192	52
Tabellaria	4	12	9	28	99	...	28	4	30	18	16	6
Synedra	18	8	...	...	11	...	10	40	18	...	12	10
Nitzschia	2	1	...	2	...	...	...	4	4	...	...	...
Navicula	6	9	3	...	1	...	2	4	6	6	6	6
Pleurosigma	2	...	...	...	...	...	...	2	...	...	...	...
Cyclotella	4	...	...	...	3	...	78	10	20	4	14	30
Cocconeis .....	...	1	1	...	...	...	...	...	...	...	2	...
Gomphonema .....	...	...	2	...	...	...	...	...	...	...	...	...
Ceratoneis .....	...	...	1	...	...	...	...	...	...	...	...	...
Eunotia .....	...	...	...	...	...	...	*	...	...	...	...	2
Surirella .....	...	...	...	...	...	...	...	...	...	2	...	...
Encyonema .....	...	...	...	...	...	...	...	...	...	...	2	...
DESMIDIACEÆ—												
Xanthidium .....	...	...	...	...	1	...	...	...	...	...	...	...
Staurostrum .....	...	...	...	...	...	...	...	4	2	...	...	...
PROTOCOCCOIDEÆ—												
Raphidium .....	...	1	3	18	2	...	4	...	22	...	...	...
Scenedesmus .....	...	...	...	...	*	...	16	...	...	...	8	...
Staurogenia .....	...	...	...	...	...	...	...	...	...	...	...	16
"775" .....	...	2	...	2	...	...	...	...	...	...	...	...
Green cells unident- ified	16	...	...	36	...	...	...	2	...	...	34	16
CYANOPHYCEÆ—												
Anabaena .....	...	...	...	...	2	...	...	4	...	2	...	2
Merismopodia .....	...	...	...	...	4	...	...	...	...	...	2	...
PROTOZOA—												
Dinobryon .....	...	5	...	...	3	...	74	10	14	8	28	2
Glenodinium .....	...	...	1	...	...	...	60	4	2	10	...	...
Peridinium .....	...	...	...	...	2	...	...	4	2	*	2	...
Mallomonas .....	...	...	...	...	...	...	2	2	...	...	...	...
Trachelomonas .....	...	...	...	...	...	...	2	2	6	4	10	...
Euglypha .....	...	...	...	...	...	...	...	...	...	...	2	...
Infusoria unidenti- fied	2	2	...	2	...	...	...	8	6	30	...	2
Ova .....	...	...	2	...	...	...	...	...	...	...	...	...

SUMMARY.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Diatomaceæ	96	67	38	184	292	...	166	98	98	202	288	110
Desmidiaceæ .....	...	...	...	...	1	...	...	4	2	...	...	...
Protococcoidæ	16	3	3	56	2	...	20	2	22	...	42	32
Cyanophyceæ .....	...	...	...	...	6	...	...	4	...	2	2	2
Protozoa	2	7	1	2	4	...	138	30	30	52	42	4
Ova .....	...	...	2	...	...	...	...	...	...	...	...	...

ANALYSES OF SOUTH MANCHESTER WATER SUPPLY.

A description of the South Manchester water supply was published in the Annual Report for 1896, page 374.

During the present year samples have been furnished every other month by Mr. C. H. Cheney, from the Porter and Taylor reservoirs; the samples being taken in each case at or near the gate house.

SOUTH MANCHESTER—PORTER RESERVOIR. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.			
2495	Jan. 24	V'y sl'gt	Very scanty	0.2	30.5	21.5	9.0	1.40	0.024	0.160	0.010	0.13	4.	1.85	
2538	Mar. 15	Slight	"	.3	26.0	18.0	8.0	1.50	.042	.132	.001	.10	4.	2.50	
2577	May 10	Clear	"	.3	28.0	21.0	7.0	1.90	.038	.140	.002	.05	5.	4.00	
2626	July 3	"	"	.3	39.0	26.5	12.5	1.80	.034	.132	.001	.05	3.	3.40	
2710	Sept. 13	Slight	Scanty	.1	41.0	29.0	12.0	1.90	.018	.108	.000	.04	4.	2.00	
2761	Nov. 7	Mod'ate	Moderate	.2	43.0	31.0	12.0	2.30	.008	.122	.002	.14	5.	2.50	
			Average	.2	34.5	24.5	10.0	1.80	.027	.132	.0027	.08	4.	2.70	

REMARKS.—The odor was described as slight, fragrant in September, and mouldy in November, and as none in the other samples.

SOUTH MANCHESTER—PORTER RESERVOIR. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Tabellaria	*			4		2
Synedra		9	6	22	2	8
Gomphonema		1		2		
Asterionella			*			8
Surirella				2		2
Cocconeis				2		6
Navicula				6	2	8
Eunotia				6		
Meridion				2		
Cyclotella					16	164
Melosira				50		2
Himantidium						20
DESMIDIACEÆ—						
Staurastrum					*	
PROTOCOCCOIDEÆ—						
Pediastrum				4		
Raphidium						2
Green cells unidentified	32				132	
CYANOPHYCEÆ—						
Celosphaerium					*	
Microcystis						2
PROTOZOA—						
Dinobryon		24	4	40		
Mallomonas			4			8
Carchesium			*			
Trachelomonas					8	2
Peridinium					2	
Infusoria unidentified		11			2	4
ROTIFERA—						
Conochilus			*			
ENTOMOSTRACA—			*			
ZOOGLÆA—						2
SPORES—					*	

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	*	10	6	96	20	220
Desmidiaceæ					*	
Protococcoideæ	32			4	132	2
Cyanophyceæ					*	
Protozoa		35	8	40	12	14
Rotifera			*			
Entomostraca			*			
Zoöglæa						2
Spores					*	

**SOUTH MANCHESTER—TAYLOR RESERVOIR. CHEMICAL EXAMINATION.
1900.**

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	Hardness as CaCO ₃ .	
2496	Jan. 24	V'y sl'gt	Scanty	0.4	34.5	23.5	11.0	1.70	0.028	0.130	0.001	0.10	3.	4.60
2539	Mar. 15	Clear	None	.1	32.0	20.0	12.0	1.50	.044	.102	.001	.05	5.	1.40
2578	May 10	"	Very scanty	.2	34.0	21.0	13.0	1.50	.038	.110	.002	.05	5.	2.80
2625	July 3	"	"	.1	35.0	27.0	8.0	1.70	.022	.068	.001	.02	3.	1.35
2709	Sept. 13	"	Scanty	.1	36.5	25.0	11.5	1.58	.018	.108	.000	.03	4.	1.45
2760	Nov. 7	"	Small	.1	37.5	29.0	8.5	2.10	.004	.112	.000	.08	3.	1.70
			Average	.2	34.9	24.2	10.7	1.68	.025	.105	.0008	.55	4.	2.21

REMARKS.—The odor was described as slight, mouldy in September and November, and as none in the others.

SOUTH MANCHESTER—TAYLOR RESERVOIR. MICROSCOPICAL EXAMINATION, 1900.

Figures indicate average number of organisms per cubic centimeter of water.
* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Gomphonema	*				2	3
Synedra		4	18	2	14	10
Cocconeis		1				1
Meridion		2	4			
Tabellaria		1	*			4
Navicula		2			2	8
Melosira			14		10	31
Asterionella			*	2		
Eunotia						3
Surirella					2	
Cyclotella				2		3
DESMIDIACEÆ—						
Staurastrum		1	2			
Cosmarium					4	1
Sphaeroszoma					8	
PROTOCOCCOIDÆ—						
Scenedesmus		4				
Raphidium		*	2			
Pediastrum					2	
Green cells unidentified					22	
CYANOPHYCEÆ—						
Tetraspora					58	
CONFERVACEÆ—						
Conferva		*				
CONJUGATÆ—						
Spirogyra			2	*		
PROTOZOA—						
Glenodinium	2				2	
Synura		54			*	
Peridinium						
Dinobryon			82	106	30	3
Vorticella				2		
Volvox				*		
Euglypha						1
Infusoria unidentified		1			4	
ROTIFERA—						
Polyarthra				4		
ENTOMOSTRACA				*		
ZOOGLÆA					8	

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	*	10	36	6	30	63
Desmidiaceæ		1	2		12	1
Protococcoideæ		4	2		24	
Cyanophyceæ					58	
Conferveæ		*				
Conjugatæ			2	*		
Protozoa	2	55	82	108	36	4
Rotifera				4		
Entomostraca				*		
Zoöglæa					8	

ANALYSIS OF STAFFORD SPRINGS WATER SUPPLY.

A description of the Stafford Springs water supply was published in the Annual Report for 1896, page 377. During the present year samples have been furnished every other month by Mr. Anthony Adams, Superintendent, the samples being taken from a tap in the borough.

STAFFORD SPRINGS. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.					NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2404	Jan. 24	V'y slgt	Scanty	0.4	40.0	21.0	19.0	1.60	0.026	0.122	0.002	0.05	4.	4.95
2535	Mar. 14	Clear	None	.3	31.0	22.0	9.0	1.40	.020	.058	.000	.10	5.	2.80
2574	May 10	"	Small	.5	34.5	22.5	12.0	1.50	.008	.120	.003	.10	4.	4.70
2624	July 3	Slight	Scanty	.7	44.5	26.5	18.0	1.50	.020	.190	.000	.10	3.	7.50
2711	Sept. 13	"	Small	.5	42.0	22.0	20.0	.94	.016	.182	.000	.03	5.	6.10
2757	Nov. 7	Clear	"	.6	53.0	35.5	17.5	2.50	.004	.138	.004	.04	8.	2.10
Average				.5	40.8	24.9	15.9	1.57	.015	.135	.0015	.07	5.	4.69

REMARKS.—The odor was described as slight, sweetish or mouldy in July, September and November.

STAFFORD SPRINGS. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Mar.	May	July	Sept.	Nov.
DIATOMACEÆ—						
Tabellaria	3	1	4	10		
Cocconeis	2					
Cyclotella	1			50		2
Navicula	3		8	5	8	2
Cocconema	2					2
Gomphonema	1		6	5		2
Synedra	2	3	8	50		
Meridion		2	*			
Melosira			2			
Asterionella			4	10		
Eunotia			4	5		
Nitzschia				15		
DESMIDIACEÆ—						
Closterium			2	10		
Cosmarium				5		
PROTOCOCCOIDEÆ—						
Pediastrum				5		
Scenedesmus						16
Raphidium						2
Green cells unidentified	1				24	
CYANOPHYCEÆ—						
Nostoc				5		
FUNGI—						
Crenothrix	2					6
Leptothrix						2
Unidentified				*		
PROTOZOA—						
Phacus	1					
Dinobryon	4	1		30		
Glenodinium				10		
Peridinium					2	
Vorticella					2	
Dendromonas						2
Infusoria unidentified		2				2
ROTIFERA—						
Unidentified				*		
VERMES—						
Anguillula		1				
SPORES	1		2			

SUMMARY.

	Jan.	Mar.	May	July	Sept.	Nov.
Diatomaceæ	14	6	36	150	8	6
Desmidiaceæ			2	15		
Protococcoideæ	1			5	24	18
Cyanophyceæ				5		
Fungi	2			*		8
Protozoa	5	3		40	4	4
Rotifera				*		
Vermes	1					
Spores		1	2			

ANALYSES OF STONINGTON WATER SUPPLY.

A description of the Stonington water supply was published in the Annual Report for 1896, page 379.

During the present year samples have been furnished monthly by Mr. Geo. H. Robinson of the Mystic Valley Water Company. The samples were taken from a tap in Stonington.

STONINGTON. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.			
2493	Jan. 24	Clear	Very scanty	0.7	43.0	29.5	13.5	5.00	0.028	0.142	0.003	0.08	4.	6.75	
2508	Feb. 8	"	"	.6	38.0	25.0	13.0	4.50	.018	.118	.001	.05	4.	5.50	
2534	Mar. 7	"	None	.4	43.5	33.5	10.0	4.30	.024	.112	.006	.08	5.	5.55	
2550	Apr. 5	"	Very scanty	.4	34.0	28.0	6.0	4.30	.012	.104	.002	.15	5.	3.85	
2568	May 2	Distinct	Small	.5	41.0	30.0	11.0	4.50	.030	.162	.000	.10	5.	6.80	
2592	June 1	Slight	"	.7	39.0	27.0	12.0	3.60	.032	.176	.001	.10	6.	7.15	
2623	July 3	Distinct	Cons'd'rble	.5	46.5	30.5	16.0	4.30	.020	.180	.000	.05	8.	4.70	
2657	Aug. 8	"	Much	.5	45.0	35.0	10.0	3.10	.028	.200	.001	.20	7.	5.25	
2690	Sept. 5	V'y m'k'd	Moderate	.7	60.5	36.5	24.0	4.86	.004	.258	.010	.06	7.	6.70	
2732	Oct. 3	Marked	Much	.5	57.5	41.0	15.5	5.00	.000	.178	.006	.07	8.	4.65	
2751	Nov. 1	Slight	Small	.5	62.5	44.5	18.0	5.30	.014	.212	.006	.10	11.	1.60	
2784	Dec. 5	"	Very scanty	.8	66.0	41.0	25.0	5.60	.010	.262	.000	.13	15.	8.70	
			Average	.6	47.9	33.4	14.5	4.70	.018	.175	.0030	.10	7.	5.60	

REMARKS.—The odor was described as distinct or marked, vegetable in September and October, and as slight, mouldy or none in the other samples.

STONINGTON. MICROSCOPICAL EXAMINATION, 1900.

Figures show average number of organisms per cubic centimeter of water.

* Indicates present in small numbers.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
DIATOMACEÆ—												
Tabellaria	5			10	54	42	35		10			
Synedra	2	2	5	4	192	46	55	2	20	4	10	2
Navicula			1		10	8				2		
Meridion			1			4						
Cyclotella				1	12	76	1475	576	95	218	108	10
Melosira					2	44	10				4	
Cocconema					2							
Eunotia					6		15					
Gomphonema					2	2	15					
Asterionella					4		5					
Ceratoneis						6						
Fragilaria						28						
Nitzschia							10		170			2
Cocconeis						4						
DESMIDIACEÆ—												
Staurostrum				1				160	165	4	2	
Arthrodesmus						2						
Closterium											2	
Xanthidium										*		2
PROTOCOCCOIDÆ—												
Pediastrum						2		2	10	4	2	2
Polyedrium								2		*		
Scenedesmus											8	
Green cells unident- fied		8					50	46	150			4
CYANOPHYCÆÆ—												
Tetraspora						24					32	
Nostoc						10					2	
Anabæna										2		
FUNGI—												
Leptothrix						10						
Sarcina						8	20					
PROTOZOA—												
Dinobryon				4	70	2	10					8
Tintinnus					2		5					
Mallomonas						*	5					
Peridinium						*	5	6	5			
Glenodinium							10	6			2	
Trachelomonas								8	5	2		
Euglena									5			
Eudorina									5		2	
Euglypha										*		
Dendromonas										*		
Chlorogonium												2
Infusoria unidenti- fied	1		2		2	2	5	2			2	8
ROTIFERRÆ—												
Anurea							*					
Polyarthra												*
Unidentified						*					*	
SPORES									5			
OVA								2			2	

SUMMARY.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Diatomaceæ	7	2	7	15	284	260	1620	578	295	224	122	14
Desmidiaceæ				1		2		160	165	4	4	2
Protococcoideæ		8				2	50	50	160	4	10	6
Cyanophyceæ						34				2	34	
Fungi						18	20					
Protozoa	1		2	4	74	4	40	22	20	2	6	18
Rotifera						*	*				*	*
Spores									5			
Ova								2			2	

ANALYSES OF THOMPSONVILLE WATER SUPPLY.

The works of the Thompsonville Water Company were built in 1885 and altered in 1899. They now consist of a reservoir 120 feet square and 10 feet deep, situated about one and a half miles north of the village, and supplied from springs by gravity. From the reservoir, the water is pumped to a stand pipe for distribution. There are about 20 miles of distributing mains. The company supplies Thompsonville, Enfield Street, Warehouse Point and a part of Suffield.

During the year samples have been furnished monthly by the Superintendent of the works, Mr. H. R. Cooper. They were taken from a tap at his house in Thompsonville.

THOMPSONVILLE. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	Hardness as CaCO ₃ .	
2490	Jan. 24	Clear	Very scanty	0.0	85.5	80.5	5.0	1.80	0.014	0.018	0.001	0.25	45.	.60
2510	Feb. 8	"	None	"	86.5	81.5	5.0	1.90	.008	.016	.001	.10	42.	.40
2531	Mar. 7	"	"	"	.0	99.5	96.0	3.5	2.00	.014	.020	.000	.00	.10
2553	April 5	"	"	"	.0	97.5	91.5	6.0	2.00	.010	.020	.004	.30	.50
2565	May 2	"	Very scanty	"	.0	98.5	94.0	4.5	2.00	.008	.012	.001	.15	.50
2593	June 1	"	None	"	.0	100.0	96.5	3.5	2.20	.010	.010	.000	.10	.40
2614	July 2	"	"	"	.0	112.0	106.0	6.0	1.90	.004	.018	.000	.20	.20
2653	Aug. 8	"	Very scanty	"	.1	103.0	97.0	6.0	1.94	.008	.022	.000	.33	.65
2692	Sept. 5	"	None	"	.1	100.5	93.0	7.5	1.84	.000	.012	.006	.30	.10
2731	Oct. 3	"	"	"	.1	101.0	95.0	6.0	1.80	.000	.012	.002	.33	.20
2748	Nov. 1	"	Very scanty	"	.0	99.0	93.0	6.0	1.90	.000	.018	.008	.11	.35
2780	Dec 5	V'y sl'gt	"	.1	94.5	86.5	8.0	1.94	.004	.028	.000	.40	46.	.50
Average				.02	98.1	92.5	5.6	1.93	.006	.017	.0019	.21	50.	.36

REMARKS.—The odor was described as none in all the samples except in November and December, when it was slight vegetable.

ANALYSES OF WATERBURY WATER SUPPLY.

A description of the Waterbury water supply was published in the Annual Report for 1896, page 384.

During the present year samples have been furnished monthly by Mr. R. A. Cairns, City Engineer, from Fenn Brook and Morris Brook, which are tributaries of Wigwam reservoir. The Fenn Brook samples were taken from the stream at a point about 200 feet from the reservoir. Those from Morris Brook were taken at a point near its junction with the West Branch.

**WATERBURY—FENN BROOK. CHEMICAL EXAMINATION.
YEARLY AVERAGES, 1898-1900.**

Figures indicate Milligrams per Liter or Parts per Million.

Date.	Color.	RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
		Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia. Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
1898	.6	46.4	32.0	14.4	1.56	.022	.149	.0020	.05	8.	5.68
1899	.4	47.2	33.2	14.0	1.72	.024	.128	.0016	.07	12.	4.77
1900	.4	50.2	37.0	13.2	1.84	.022	.105	.0013	.11	12.	4.54

**MORRIS BROOK. CHEMICAL EXAMINATION. YEARLY
AVERAGES, 1899-1900.**

1899	.2	46.9	35.9	11.0	2.34	.020	.107	.0022	.09	15.	2.45
1900	.3	46.5	35.4	11.1	2.37	.019	.103	.0015	.10	15.	3.44

WATERBURY.—FENN BROOK. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Nitrogen, Not filtered.	Nitrites.	Nitrates.		
2489	Jan. 22	Clear	Very scanty	0.7	44.0	21.5	22.5	1.90	0.044	0.168	0.002	0.10	8.	7.85
2506	Feb. 8	"	"	.3	44.0	33.0	11.0	1.90	.064	.114	.001	.10	10.	5.00
2529	Mar. 7	"	Scanty	.3	40.0	29.0	11.0	2.30	.060	.114	.004	.08	8.	2.70
2548	Apr. 5	"	Very scanty	.3	36.0	25.0	11.0	1.80	.008	.118	.002	.15	8.	3.70
2563	May 2	"	"	.5	40.0	29.0	11.0	1.30	.024	.118	.002	.10	10.	5.85
2589	June 1	"	"	.5	45.0	34.5	10.5	1.10	.030	.170	.000	.10	10.	5.60
2612	July 2	"	"	.3	53.5	43.5	10.0	1.90	.012	.084	.000	.13	16.	3.30
2668	Aug. 14	"	Scanty	.1	53.0	43.5	9.5	1.80	.006	.058	.001	.18	15.	.25
2701	Sept. 12	"	Small	.2	60.5	50.5	10.0	1.64	.008	.052	.000	.13	18.	1.45
2725	Oct. 1	"	"	.1	63.5	53.5	10.0	2.00	.000	.052	.000	.11	17.	1.60
2767	Nov. 14	"	Moderate	.8	73.5	51.5	22.0	2.90	.010	.196	.002	.10	22.	8.60
2782	Dec. 5	V'y slgt	Scanty	.7	50.0	29.5	20.5	1.60	.006	.022	.002	.08	8.	8.60
			Average	.4	50.2	37.0	13.2	1.84	.022	.105	.0013	.11	12.	4.54

REMARKS.—The odor was described as slight, mouldy or vegetable in April, and from August to December.

WATERBURY.—MORRIS BROOK. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.		RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Nitrogen, Not filtered.	Nitrites.	Nitrates.		
2488	Jan. 22	Clear	Very scanty	0.4	40.0	27.0	13.0	2.10	0.034	0.140	0.002	0.04	12.	4.85
2505	Feb. 8	"	"	.3	42.5	32.5	10.0	2.50	.018	.114	.001	.15	10.	5.05
2528	Mar. 7	"	Small	.1	42.0	33.0	9.0	2.60	.064	.164	.006	.15	10.	3.30
2547	Apr. 5	"	Very scanty	.2	38.5	28.5	10.0	2.00	.014	.114	.002	.10	13.	2.50
2562	May 2	"	"	.3	43.0	35.0	8.0	2.20	.028	.114	.002	.05	15.	4.10
2588	June 1	"	"	.3	41.0	32.0	9.0	1.90	.026	.082	.000	.10	15.	3.75
2611	July 2	"	"	.2	53.0	42.5	10.5	2.90	.018	.076	.001	.10	20.	1.60
2667	Aug. 14	"	"	.1	51.5	39.5	12.0	2.26	.006	.128	.000	.20	18.	2.40
2702	Sept. 12	"	Scanty	.3	53.0	46.0	7.0	2.80	.014	.058	.002	.03	19.	1.00
2726	Oct. 1	"	Small	.1	52.0	44.0	8.0	2.70	.002	.044	.000	.06	19.	1.40
2766	Nov. 14	"	Moderate	.4	56.5	41.5	15.0	3.00	.008	.182	.000	.09	21.	5.50
2781	Dec. 5	V'y slgt	Very scanty	.5	45.0	23.0	22.0	1.56	.002	.020	.002	.11	8.	6.40
			Average	.3	46.5	35.4	11.1	2.37	.019	.103	.0015	.10	15.	3.44

REMARKS.—The odor was described as slight, mouldy, from August to December, and as none in the other samples.

ANALYSES OF THE HOCKANUM RIVER WATER.

A description of the Hockanum river with analyses of its water was published in the Annual Report for 1896, page 321. At the time of those analyses much of the sewage of Rockville went directly into the river, but since then an intercepting sewer has been constructed and the main bulk of the sewage is now discharged about one mile below the point of collection of the Windemere samples. The results of the analyses, however, show that a considerable amount of nitrogenous organic matter is still discharged into the river. The amount of the contamination may be seen by comparing the analyses at Windemere with those for the corresponding months of the Rockville water supply, as the river at this point is supplied almost wholly by the overflow from Schenipset lake from which the water supply is drawn.

Filter beds have been constructed for removing the sewage of South Manchester from the South Branch, but these were not in practical operation for any considerable time during the period when samples were taken.

The samples for analysis were taken each month, from May to October inclusive, at the same stations on the river as in previous years. These stations are as follows:

No. 1.—This station was located at the bridge where the river crosses the road a short distance from the Windemere Mills. The distance below Rockville is about a mile and three-quarters. The samples taken here were composite, being a mixture of small samples, equal in amount, taken during the day at the following hours: 9 A. M., 11 A. M., 1 P. M., 3 P. M., 5 P. M., 7 P. M., 5 A. M. They were collected by Mr. M. A. Regan of Rockville.

No. 2.—This station is located in North Manchester at the pond just above the Oakland Mills, about six miles below No. 1. The samples were collected by Mr. S. J. Andrew of South Manchester.

No. 3.—This station was at Walker's Mill Pond in Burnside, a point about six and one-quarter miles below No. 2. The samples were collected by Mr. George R. Walker of Burnside.

HOCKANUM RIVER.—AVERAGES OF CHEMICAL ANALYSES, FOR SIX MONTHS OF 1895-1896-1900.

Figures indicate Milligrams per Liter or Parts per Million.

No. 1—WINDEMERE.

Year.	Color, Filtered.	RESIDUE ON EVAPORATION.						Chlorine.	NITROGEN.					
		Total at 100 C.		Non-Volatile, Mineral.		Volatile, Organic.			Of Free Ammonia Unfiltered.	Total Organic.		Of Nitrites.	Of Nitrates.	
		Filtered.	Unfiltered.	Filtered.	Unfiltered.	Filtered.	Unfiltered.			Filtered.	Unfiltered.			
1895.	.05	71.9	138.9	44.9	95.5	27.0	43.4	4.85	.071	.810	1.470	.017	.16	
1896	-	74.2	98.6	42.6	57.8	31.6	40.8	4.49	.070	.521	.913	.008	.18	
1900.	.04	55.3	*71.9	37.2	*48.7	18.1	*23.2	3.38	.073	.548	.910	.010	.25	

No. 2—NORTH MANCHESTER.

1895.	.5	69.7	82.1	47.6	55.1	22.1	27.0	3.87	.124	.796	1.096	.008	.11	
1896.	.5	71.3	78.3	51.0	51.7	20.3	26.6	4.45	.063	.637	.762	.009	.16	
1900	.3	71.8	*75.4	55.0	*55.4	16.8	*20.0	3.95	.167	.662	.752	.022	.24	

No. 3—BURNSIDE.

1895	.4	87.3	98.6	71.0	79.1	16.3	19.5	6.03	.172	.607	.802	.025	.10	
1896	.4	79.3	81.4	60.5	60.3	18.8	21.1	5.61	.194	.589	1.156	.023	.14	
1900	.4	73.7	*80.7	56.6	*61.1	17.1	*19.6	4.65	.183	.628	.722	.025	.16	

* Five months.

HOCKANUM RIVER, No. 1—WINDEMERE, CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	Turbidity.	Sediment.	RESIDUE ON EVAPORATION.						NITROGEN.			
				Total at 100° C.			Non-Volatile, Mineral.			Volatile, Organic.		Total Organic.	Of Nitrates.
				Filtered.	Unfiltered.	Unfiltered.	Filtered.	Unfiltered.	Unfiltered.	Filtered.	Unfiltered.		
2584	May 23-29	Slight	Small	4	52.0	70.0	34.5	52.0	17.5	18.0	.032	.700	.800
2598	June 11-12	Distinct	Moderate	4	48.0	82.0	31.5	58.0	16.5	24.0	.070	.500	.950
2630	July 5-6	Slight	Small	3	63.0	96.5	58.0	68.0	15.0	28.0	.180	1.000	1.250
2670	Aug. 14-15	Very marked	Much	7	69.5	---	51.5	---	18.0	---	---	3.380	.430
2697	Sept. 10-11	Marked	Much	3	47.0	48.5	28.0	27.0	19.0	21.5	.034	.240	1.500
2734	Oct. 3-4	Marked	Much	2	52.0	62.5	29.5	38.0	22.5	24.5	.006	.470	.550
			Average	4	55.3	*71.9	37.2	*48.7	18.1	*23.2	.073	.548	.910

REMARKS.—The odor was described as distinct, musty or unpleasant in July and Sept. Slight musty or oily in the other samples.

HOCKANUM RIVER, No. 2—NORTH MANCHESTER.

2585	May 29	Clear	Small	4	62.5	68.0	48.5	51.5	14.0	16.5	.076	.800	.900
2599	June 12	Slight	Small	4	64.0	72.0	49.0	55.0	15.0	17.0	.040	.580	.700
2631	July 6	Clear	Scanty	3	71.5	74.0	54.5	50.0	17.0	18.0	.222	1.050	1.200
2673	August 15	Marked	Much	4	80.0	---	67.5	---	12.5	---	---	.600	.620
2696	Sept. 11	Marked	Moderate	1	63.5	74.0	53.0	55.5	15.5	18.5	.018	.320	.350
2736	October 4	Marked	Much	3	84.5	89.0	57.5	59.0	27.0	30.0	.120	.620	.740
			Average	3	71.8	*75.4	55.0	*55.4	16.8	*20.0	.167	.662	.752

REMARKS.—The odor was described as distinct, musty in October, and as slight musty or mouldy in the other samples.

HOCKANUM RIVER, No. 3—BURNSIDE.

2586	May 28	Slight	Small	4	65.5	67.5	52.5	52.5	13.0	15.0	.180	.900	.950
2600	June 12	Very slight	Scanty	4	66.0	70.0	51.0	54.0	15.0	16.0	.198	.620	.710
2632	July 6	Clear	Small	4	69.0	70.5	53.0	53.5	16.0	17.0	.180	1.100	1.200
2671	August 15	Distinct	Moderate	5	61.0	---	45.0	---	16.5	---	.294	.320	.380
2698	Sept. 11	Very marked	Small	3	84.5	93.5	63.0	67.5	21.5	26.0	.052	.220	.300
2735	Oct. 4	Marked	Moderate	4	95.5	102.0	75.0	78.0	20.5	24.0	.192	.610	.700
			Average	4	73.7	*80.7	56.6	*61.1	17.1	*19.6	.183	.628	.722

REMARKS.—The odor was described as marked in September, and slight mouldy or musty in the other samples. * Five months.

ANALYSES OF HOUSATONIC RIVER WATER.

Until the present year no analyses have been published of the Housatonic river in Connecticut, but during the year monthly samples have been taken from two points for chemical analysis.

The first station was situated at Falls Village, at a point about forty rods above the Housatonic Falls, and about three miles below the Massachusetts border. The samples were taken by Mr. John A. Owen.

The second station was at the dam of the Ousatonic Water Co. in Derby. This point is about 65 miles below the first station, and is just above the point where the Naugatuck river joins the Housatonic. The samples from this station were furnished under the direction of Mr. D. S. Brinsmade.

The influence of the lime-stone region through which the river flows is shown in the greater hardness and the larger amount of solids in the Falls Village samples than in those at Derby, at which point the water is considerably diluted with water coming from a watershed of totally different character. The influence of the sewage contamination above Falls Village is shown clearly in the very considerable increase in chlorine and nitrates which took place during the dry months of the autumn.

HOUSATONIC RIVER—FALLS VILLAGE. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF				Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
2498	Jan. 26	Slight	Scanty	0.3	79.0	69.0	10.0	1.70	0.044	0.192	0.002	0.15	60.	4.40
2522	Feb. 22	Distinct	Small	.2	86.0	76.0	10.0	1.90	.042	.102	.002	.10	70.	2.40
2540	Mar. 21	V'y sl'gt	"	.3	69.0	54.0	15.0	1.60	.018	.170	.004	.15	35.	5.35
2561	Apr. 30	Clear	V'y small	.2	67.0	53.0	14.0	1.80	.046	.082	.002	.05	75.	2.50
2579	May 17	Slight	Scanty	.3	62.5	49.5	13.0	2.00	.070	.188	.008	.05	60.	3.75
2595	June 11	"	"	.2	111.0	95.0	16.0	2.10	.090	.174	.001	.10	90.	2.60
2627	July 5	Clear	V'y scanty	.2	125.0	107.5	17.5	2.70	.028	.112	.003	.10	70.	2.90
2669	Aug. 14	"	Small	.1	131.0	115.0	16.0	2.86	.024	.118	.002	.18	63.	2.70
2700	Sept. 12	Slight	Scanty	.3	115.0	93.0	22.0	2.10	.026	.270	.004	.13	55.	2.80
2739	Oct. 10	"	Small	.2	145.5	125.5	20.0	4.00	.020	.100	.002	.13	68.	2.40
2764	Nov. 13	"	Moderate	.4	139.5	119.0	20.5	3.26	.012	.148	.002	.22	53.	4.20
2786	Dec. 10	"	Scanty	.4	106.0	84.5	21.5	1.60	.034	.146	.006	.20	59.	3.70
Average				.3	103.0	86.7	16.3	2.30	.038	.150	.0032	.13	63.	3.31

REMARKS.—The odor was described as marked, mouldy in November, and as slight, mouldy or vegetable, or as none in the other samples.

HOUSATONIC RIVER—DERBY. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.				NITROGEN OF					Hardness as CaCO ₃ .	Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.	Chlorine.	Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.			
2499	Jan. 29	Slight	V'y scanty	0.3	79.0	67.0	12.0	2.30	0.052	0.132	0.002	0.10	60.	3.65	
2523	Feb. 21	"	Small	.3	60.0	50.0	10.0	2.10	.046	.108	.002	.10	40.	2.75	
2541	Mar. 21	Clear	Moderate	.3	51.5	40.5	11.0	1.90	.050	.128	.004	.15	27.	3.50	
2557	Apr. 26	"	Small	.3	75.5	60.0	15.5	2.30	.036	.124	.002	.15	45.	3.35	
2580	May 17	"	"	.3	80.5	66.5	14.0	1.90	.060	.108	.006	.05	70.	3.30	
2596	June 11	Distinct	"	.3	99.0	82.0	17.0	2.30	.078	.110	.002	.15	80.	2.60	
2628	July 5	Clear	V'y scanty	.2	108.5	92.5	16.0	2.40	.050	.144	.002	.05	70.	2.55	
2666	Aug. 14	Slight	Moderate	.2	115.5	97.0	18.5	2.34	.040	.140	.000	.10	57.	3.60	
2695	Sept. 11	"	Scanty	.2	116.5	96.5	20.0	2.84	.026	.144	.060	.05	91.	2.70	
2738	Oct. 10	Distinct	Moderate	.1	116.0	99.0	17.0	3.60	.036	.144	.001	.10	58.	2.40	
2765	Nov. 14	"	"	.5	113.5	89.0	24.5	3.50	.016	.188	.004	.19	36.	4.00	
2787	Dec. 10	Slight	V'y scanty	.4	82.5	63.0	19.5	1.86	.006	.168	.006	.20	43.	4.60	
			Average	.3	91.5	75.2	16.3	2.44	.042	.136	.0076	.13	56.	3.32	

REMARKS.—The odor was described as distinct, mouldy in June and November, and as slight or none in the other months.

EXAMINATION OF SEWAGE AND EFFLUENT FROM SPRINGSIDE HOME.

Springside Home is the New Haven Almshouse, and during the year has had an average of 387 inmates.

The plant for the disposal of the sewage from the Springside Home by intermittent filtration was put in operation on September 23, 1899. It consists of three filter beds sixty feet square, separated by partitions of sandy loam and clay twelve feet wide. The bottoms of the beds are given a slope of six inches east and west, and a slope north and south towards the center line of six inches. The bottoms are mainly of hard pan with some rock, over which is laid 3 and 5 inch agricultural tiles, connecting with vitrified pipes leading to the discharge channel.

The underdrain, composed of crushed stone ranging in size from $1\frac{1}{2}$ to $1\frac{1}{4}$ inch or of gravel of corresponding size, has an average depth of 10 inches, above which is placed a layer of coarse sand $2\frac{1}{2}$ feet in thickness, and on this a layer of finer sand $1\frac{1}{2}$ feet in thickness, all dressed level.

Analyses of the sand of these two layers made by Dr. William H. Parker are given in the following table, showing the weight in grams and the per cent. of sand passing the different sieves and the effective size and uniformity coefficient.

The table of analyses of sand and the diagram of the filter beds are taken from the Annual Report of the Department of Public Works of the City of New Haven for 1899.

West of the beds is the tank, 18 feet by 20 feet, which receives the sewage through an 8-inch pipe. This tank is closed by a portable cover during the winter months in order to keep the sewage warm.

This tank becomes filled about every three hours with the sewage, which has previously passed through a straining basket with a $1\frac{1}{2}$ inch mesh, and is discharging automatically by means of a Miller syphon of special design through a manhole.

From the manhole it flows as is desired through any of the three 15-inch outlet pipes running to the filter beds, where it is distributed through holes in wooden troughs which reach to the center of the beds. Settlings are agitated once a day during a discharge and allowed to escape through an overflow pipe near the bottom of the tank.

The beds are operated successively for a day at a time, thus allowing a period of rest of two days for each bed before it is again used.

A study of the operation of the beds, with the view of the collection of samples for chemical examination to show the efficiency of the beds, was first made on February 15, 1900. The bed studied was Bed No. 1 or the South bed, which was in operation that day after the usual rest of two days. The operation of the collecting sewage tank was determined, and a composite sample representing the average composition of the sewage of the day was taken. It was found that there were nine discharges during the day from the collecting tank. The times of each discharge during the day was as follows: 8.30 A. M., 12.26, 2.50, 5.15, 7.50, 10.15 P. M., 12.50 A. M., 3.30, 6.05.

At the first discharge at 8.30 A. M., the sediment was run off and no sample of the sewage was collected. The effluent from the bed showed at 10.22. Sewage had all soaked in at 11 A. M., and after the second sewage application the bed did not become uncovered.

Eight dippers full of sewage were collected at equal intervals during each discharge of the tank, which continued in each case for about eight minutes, and the sediment was stirred up during the last collection. These portions of sewage were mixed in a galvanized iron can and one gallon of the mixture, constituting sample No. 2511, was taken for analysis.

A twelve ounce bottle was filled with effluent from the bed at the period of maximum flow after eight successive discharges from the tank. These constituted samples 2514 to 2521 inclusive, and were examined for free ammonia, nitrates and chlorine.

These examinations resulted as follows:

No.	2514	2515	2516	2517	2518	2519	2520	2521
Chlorine.....	16.0	15.0	19.5	23.0	21.5	19.0	16.0	13.5
N. of Free Ammonia	6.60	6.60	7.80	7.00	7.00	6.66	6.20	6.00
N. of Nitrates	5.50	5.00	3.00	2.50	1.00	1.50	1.75	1.50

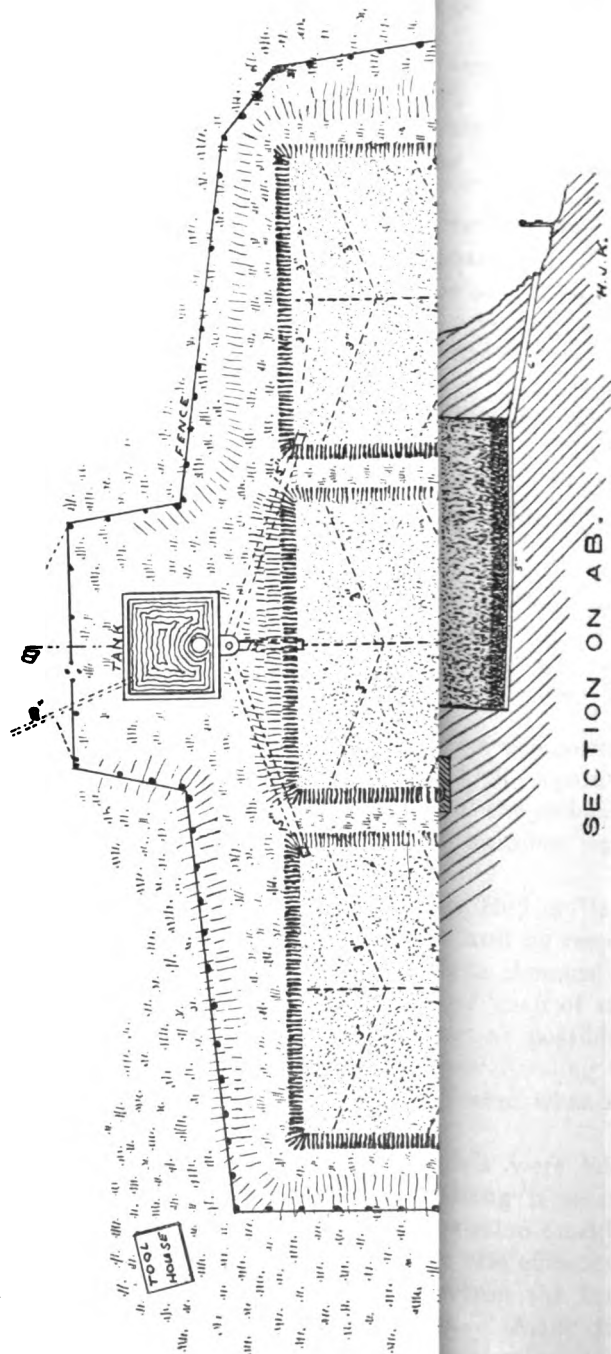
A complete chemical analysis was made of composite sample No. 2512, composed of 200 c. c. from each of the separate collections, thus giving the average composition of the effluent for the day. On June 20, 1900, a similar set of samples was taken, practically duplicating those of February.

Samples were obtained from the Middle Bed or Bed 2 and from the North Bed or Bed 3, on June 21 and 22 respectively.

Beginning in August, samples for complete chemical analysis have been taken monthly of the effluents of each of the three beds. The samples were collected as near as possible at the maximum rate of flow of the effluents after flooding the bed, thus securing a sample representing the effluent when the beds are doing a maximum amount of work.

At the time when the December samples were taken, the surface of the filter beds were frozen, making it necessary to bore holes in the crust in order to start filtration quickly. For that reason it is perhaps unfair to compare the effluents at that time with those of previous collections when the beds were working under more favorable conditions. Aside from the

SPRINGSIDE SEWAGE FILTRATION PLANT.



poorer results obtained after the freezing of the surface of the filters, a comparison of previous results shows a slight deterioration in the condition of the effluents toward the end of the year and results so high as to indicate that more is demanded of the beds at the present rate of filtration than is consistent with the best results.

The results, however, indicate an effluent which need not be considered as a source of contamination to the brook into which it is discharged. The object for which the filter beds were built is therefore accomplished, as they are now operated.

ANALYSES OF SAND USED IN SPRINGSIDE FILTRATION BEDS.

Sieves.		Coarse Sand used in Bottom Layer.				Finer Sand used in Top Layer.			
		Sample A.		Sample B.		Sample A.		Sample B.	
Meshea.	Size of Meshes in Millimeters.	Weight in Grams of Sand Passing.	Per cent. of Sand Passing.	Weight in Grams of Sand Passing.	Per cent. of Sand Passing.	Weight in Grams of Sand Passing.	Per cent. of Sand Passing.	Weight in Grams of Sand Passing.	Per cent. of Sand Passing.
*190	0.76	0.2	0.4	0.1	0.2	0.2	0.4	0.3	0.6
100	.200	0.5	1.0	0.4	0.8	0.8	1.6	0.8	1.6
60	.253	1.0	2.0	1.0	2.0	1.5	3.0	1.4	2.82
40	.414	5.0	10.0	6.6	13.2	10.0	20.0	10.2	20.4
20	.904	20.7	41.7	25.0	50.1	45.7	91.0	45.6	91.2
10	2.050	38.8	77.6	40.9	81.3	49.8	97.7	49.6	97.72
6	3.440	44.2	97.8	45.4	91.2	50.0	100.0	50.0	100.0
4	5.570	47.7	99.1	48.3	95.5				
2	10.670	50.2	100.0	50.0	100.0				
Effective size.....		.41		.36		.33		.33	
Uniformity coefficient....		3.12		3.12		2.14		2.14	

* These figures indicate, approximately, the number of meshes to the lineal inch.

SPRINGSIDE SEWAGE. CHEMICAL EXAMINATION, 1900.

Figures indicate Millimeters per Liter or Parts per Million.

No.	Date.	RESIDUE ON EVAPORATION.						Chlorine.	NITROGEN.				
		Total at 100° C.		Non-Volatile, Mineral.		Volatile, Organic.			Of Free Ammonia.	Total Organic.		Of Nitrites.	Of Nitrates.
		Unfiltered.	Filtered.	Unfiltered.	Filtered.	Unfiltered.	Filtered.			Unfiltered.	Filtered.		
2511	Feb. 15	387.5	111.0	----	----	78.0	33.0	19.5	3.00	15.62	8.00	0.014	0.15
2603	June 20	1283.0	406.0	610.0	291.0	673.0	115.0	55.5	30.00	25.00	9.00	.000	.10

SPRINGSIDE SEWAGE FILTERS.—EFFLUENT FROM SOUTH BED, No. 1.
CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF				Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.	
*2512	Feb. 15	Distinct	None	----	91.5	70.5	21.0	18.0	5.630	.410	.040	3.00	----
2604	June 20	Slight	Small	----	453.0	375.0	78.0	50.0	19.500	.900	.220	16.00	----
2687	Aug. 23	"	Consid'r'ble	.02	351.0	286.0	65.0	50.0	.012	.042	.024	27.60	1.95
2724	Sept. 28	"	Small	.04	286.5	249.0	37.5	47.0	.238	.154	.012	20.00	3.05
2745	Oct. 25	Clear.	Very slight	.03	245.0	198.5	46.5	36.0	.048	.100	.008	23.00	2.35
2771	Nov. 21	"	None	.06	269.0	233.5	35.5	37.0	1.000	.138	.080	33.00	2.30
2789	Dec. 19	Distinct	Scanty	.14	186.5	159.5	27.0	56.0	2.700	.420	1.600	4.00	6.80
			Average		298.5	250.2	48.3	46.0	3.916	.292	.324	20.60	

REMARKS.—The odor was described as distinctly musty in August, musty in September, and as slight, musty or earthy in the other samples.

* Not included in averages.

SPRINGSIDE SEWAGE FILTERS—EFFLUENT FROM MIDDLE BED, No. 2. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
*2609	June 20	Slight	Very small	----	262.5	238.0	24.5	43.5	3.300	.390	.120	10.00	----	
2681	Aug. 21	Nrly cl'r	None	.03	386.5	335.5	51.0	80.0	.094	.022	.012	22.00	2.85	
2722	Sept. 26	V'y s'ght	Very scanty	.05	221.0	188.5	32.5	38.0	.020	.180	.012	22.00	2.90	
2746	Oct. 26	Clear	Very slight	.03	266.0	239.0	27.0	38.5	.285	.278	.100	18.00	4.10	
2769	Nov. 19	Slight	Very scanty	.08	231.0	171.0	60.0	47.5	.608	.284	.040	31.00	3.90	
2790	Dec. 20	Distinct	"	.20					1.000	1.010	.460	8.50	9.70	
Average				.08	273.4	234.4	39.0	49.5	.401	.355	.125	20.30	4.69	

REMARKS.—The odor was described as slight earthy in all the samples.

* Not included in averages.

SPRINGSIDE SEWAGE FILTERS—EFFLUENT FROM NORTH BED, No. 3. CHEMICAL EXAMINATION, 1900.

Figures indicate Milligrams per Liter or Parts per Million.

No.	Date.	PHYSICAL CHARACTERS.			RESIDUE ON EVAPORATION.			Chlorine.	NITROGEN OF					Oxygen Consumed.
		Turbidity.	Sediment.	Color.	Total at 100° C.	Non-Volatile, Mineral.	Volatile, Organic.		Free Ammonia, Not filtered.	Albuminoid Ammonia, Not filtered.	Nitrites.	Nitrates.		
*2610	June 20	Clear	Very scanty	----	-----	-----	-----	47.5	3.000	.380	.080	14.00	----	
2685	Aug. 22	Distinct	Consid'able	.03	546.5	381.5	165.0	43.5	.070	.088	.012	36.00	3.55	
2723	Sept. 27	V'y sl'gt	Very scanty	.05	334.5	281.0	53.5	55.5	.176	.228	.008	25.00	3.25	
2744	Oct. 24	"	Very slight	.04	205.0	175.0	30.0	31.0	.136	.108	.010	25.00	2.70	
2770	Nov. 20	"	Very scanty	.09	224.0	192.5	31.5	44.0	3.200	.320	.200	25.00	5.20	
2791	Dec. 21	Slight	"	.06	225.5	167.0	58.5	33.0	.950	.400	.024	20.00	4.60	
		Average		.05	307.1	239.4	67.7	41.4	.906	.229	.051	26.20		

REMARKS.—The odor was described as distinctly musty in August, musty in September, and as slight musty or disagreeable in the other samples.

* Not included in averages.

DEPARTMENT OF PUBLIC HEALTH.

STATE OF CONNECTICUT.

STATE BOARD OF HEALTH.

	Term expires.
Prof. WILLIAM H. BREWER, Ph.D., New Haven, President...	July 1, 1903
RALPH S. GOODWIN, M.D., Thomaston	July 1, 1903
GROVE H. WILSON, M.D., Meriden	July 1, 1901
THEODORE H. MCKENZIE, C.E., Southington.....	July 1, 1901
HENRY G. NEWTON, Attorney, New Haven.....	July 1, 1905
EDWARD K. ROOT, M.D., Hartford	July 1, 1905
Prof. C. A. LINDSLEY, M.D., Secretary and member (<i>ex-officio</i>), New Haven. Appointed by the Board.	

Office of Secretary, 15 Elm Street, New Haven.

COUNTY AND TOWN OFFICIALS AND HEALTH OFFICIALS
OF THE CITIES AND BOROUGHES OF CONNECTICUT.

(Arranged in Alphabetical order by counties.)

Names and P. O. address of the County Health Officers and of the Town Health Officers arranged in alphabetical order by counties.

Also the Health Officers and Health Committees of the Cities and Boroughs, elected annually in accordance with their respective charters.

Place.	Name.	P. O. Address.
HARTFORD COUNTY	Daniel A. Markham.....	Hartford.
NEW HAVEN COUNTY	Carleton E. Hoadley	New Haven.
NEW LONDON COUNTY ...	Edward W. Higgins ...	Norwich.
FAIRFIELD COUNTY	George E. Hill	Bridgeport.
WINDHAM COUNTY	William A. King	Willimantic.
LITCHFIELD COUNTY	Frank W. Etheridge	Thomaston.
MIDDLESEX COUNTY	Wesley U. Pearne	Middletown.
TOLLAND COUNTY	Edward M. Yeomans ...	Andover.

HARTFORD COUNTY.

Daniel A. Markham, Esq., County Health Officer, Hartford.

AVON	John L. North, M.D.	Avon.
BERLIN	R. E. Ensign, M.D.	Berlin.
BLOOMFIELD	O. K. Isham, M.D.	Bloomfield.
BRISTOL	H. D. Brennan, M.D. ...	Bristol.
BURLINGTON	John Luby	Burlington.
CANTON	W. H. Crowley, M.D. ..	Collinsville.
EAST GRANBY	Frank H. Dibble	East Granby.
EAST HARTFORD	F. H. Mayberry, M.D. ..	Burnside.
EAST WINDSOR	H. O. Allen, M.D.	Broad Brook.
ENFIELD	G. T. Finch, M.D.	Thompsonville.
FARMINGTON	J. B. Newton, M.D.	Unionville.
GLASTONBURY	C. G. Rankin, M.D.	Glastonbury.
GRANBY	A. J. Weed, M.D.	Granby.
HARTLAND	W. S. Miller	Hartland.
MANCHESTER	M. S. Bradley, M.D.	South Manchester.
MARLBOROUGH	Willis W. Hall	Marlborough.
NEW BRITAIN	W. P. Bunnell, M.D.	New Britain.
NEWINGTON	J. S. Kirkham	Newington.
PLAINVILLE	J. N. Bull, M.D.	Plainville.
ROCKY HILL	F. L. Burr, M.D.	Rocky Hill.
SIMSBURY	W. R. Munson, M.D. ...	Tariffville.
SOUTHINGTON	W. G. Steadman, M.D. .	Southington.
SOUTH WINDSOR	H. A. Deane, M.D.	East Windsor Hill.
SUFFIELD	J. K. Mason, M.D.	Suffield.
WEST HARTFORD	F. H. Stadtmueller	Elmwood.
WETHERSFIELD	E. G. Fox, M.D.	Wethersfield.
WINDSOR	N. S. Bell, M.D.	Windsor.
WINDSOR LOCKS	J. A. Coogan, M.D.	Windsor Locks.

CITY HEALTH OFFICERS.

HARTFORD	<i>President</i>	T. F. Kane, M.D.
	<i>Clerk</i>	J. B. Hall, M.D.
NEW BRITAIN	<i>Health Officer</i>	R. M. Clark, M.D.

BOROUGH HEALTH OFFICERS.

BRISTOL.....	H. D. Brennan, M.D.
SOUTHINGTON	W. G. Steadman, M.D.

NEW HAVEN COUNTY.

Carleton E. Hoadley, Esq., County Health Officer, New Haven.

NEW HAVEN	F. W. Wright, M.D.	New Haven.
BEACON FALLS	Nelson R. Allen	Beacon Falls.
BETHANY	S. G. Davidson	Bethany.
BRANFORD	C. W. Gaylord, M.D.	Branford.
CHESHIRE	George E. Myers, M.D.	Cheshire.
EAST HAVEN	Chas. W. Holbrook, M.D.	East Haven.
GUILFORD	Redfield B. West, M.D.	Guilford.
HAMDEN	H. H. Smith, M.D.	Whitneyville.
MADISON	A. D. Ayer, M.D.	Madison.
MERIDEN	E. A. Wilson, M.D.	Meriden.
MIDDLEBURY	Frank A. Tyler	Middlebury.
MILFORD	E. B. Heady, M.D.	Milford.
NAUGATUCK	W. P. Smith	Naugatuck.
NORTH BRANFORD	C. W. Gaylord, M.D.	Branford.
NORTH HAVEN	R. B. Goodyear, M.D.	North Haven.
ORANGE	Chas. A. Bevan, M.D.	West Haven.
OXFORD	L. Barnes, M.D.	Oxford.
PROSPECT	J. R. Platt	Prospect.
SEYMOUR	F. A. Benedict, M.D.	Seymour.
SOUTHBURY	Wm. H. Wakelee	South Britain.
WALLINGFORD	W. P. Wilson, M.D.	Wallingford.
WATERBURY	B. A. O'Hara, M.D.	Waterbury.
WOLCOTT	J. H. Garrigus	Waterbury.
WOODBIDGE	J. W. Barker, M.D.	Westville.

CITY HEALTH OFFICERS.

ANSONIA	L. E. Cooper, M.D.
DERBY	L. D. LaBonté, M.D.
MERIDEN	A. W. Tracy, M.D.
NEW HAVEN	F. W. Wright, M.D.
WATERBURY	C. W. S. Frost, M.D.

BOROUGH HEALTH OFFICERS.

BRANFORD	C. W. Gaylord, M.D.
GUILFORD	Redfield B. West, M.D.
WEST HAVEN	Chas. A. Bevan, M.D.

NEW LONDON COUNTY.

Edward W. Higgins, Esq., County Health Officer, Norwich.

BOZRAH	N. Johnson, M.D.	Bozrah.
COLCHESTER	J. T. Mitchell, M.D.	Colchester.
EAST LYME	F. H. Dart, M.D.	Niantic.
FRANKLIN	E. L. Danielson, M.D. ...	Lebanon.
GRISWOLD	G. H. Jennings, M.D. ...	Jewett City.
GROTON	J. Gray, M.D.	Mystic.
LEBANON	E. L. Danielson, M.D. ..	Lebanon.
LEDYARD	N. B. Lewis, M.D.	Norwich.
LISBON	Frank E. Olds.	Jewett City.
LYME	J. G. Ely, M.D.	Hamburgh.
MONTVILLE	M. E. Fox, M.D.	Uncasville.
NORTH STONINGTON	E. H. Knowles, M.D. ...	North Stonington.
NORWICH	E. H. Linnell, M.D.	Norwich.
OLD LYME	J. L. Burnham, M.D. ...	Lyme.
PRESTON	O. F. Harris, M.D.	Norwich.
SALEM	C. F. Congdon, M.D. ...	Salem.
SPRAGUE	T. I. Stanton, M.D.	Baltic.
STONINGTON	O. M. Barber, M.D.	Mystic.
VOLUNTOWN	W. R. Davis, M.D.	Voluntown.
WATERFORD	G. M. Minor, M.D.	Waterford.

CITY HEALTH OFFICERS.

NEW LONDON.....	<i>Chairman Health Com.,</i>	Wm. J. O'Neil, M.D.
NORWICH		W. K. Tingley, M.D.

BOROUGH HEALTH OFFICERS.

COLCHESTER	J. T. Mitchell, M.D.
STONINGTON.....	C. O. Maine, M.D.
JEWETT CITY	G. H. Jennings, M.D.

FAIRFIELD COUNTY. .

George E. Hill, Esq., County Health Officer, Bridgeport.

DANBURY	G. E. Lemmer, M.D. ...	Danbury.
BETHEL	A. E. Barber, M.D.	Bethel.
BROOKFIELD	J. F. Smith, M.D.	Brookfield.
DARIEN	G. H. Noxon, M.D.	Darien.
EASTON	B. W. White, M.D.	Bridgeport.
FAIRFIELD	W. H. Donaldson, M.D.	Fairfield.
GREENWICH	L. P. Jones, M.D.	Greenwich.
HUNTINGTON	W. S. Randall, M.D. ...	Shelton.
MONROE	F. J. Wales, M.D.	Stepney Depot.
NEW CANAAN	C. B. Keeler, M.D.	New Canaan.
NEW FAIRFIELD	W. S. Watson, M.D.	Danbury.
NEWTOWN	E. M. Smith, M.D.	Newtown.
NORWALK	W. J. Tracey, M.D.	Norwalk.
REDDING	E. H. Smith, M.D.	Redding.
RIDGEFIELD	W. E. Weed, M.D.	Ridgefield.
SHERMAN	J. N. Woodruff, M.D. ..	Sherman.
STAMFORD	F. J. Rogers, M.D.	Stamford.
STRATFORD	G. F. Lewis, M.D.	Stratford.
TRUMBULL	E. S. Fairchild	Nichols.
WESTON	F. Gorham, M.D.	Lyon's Plain.
WESTPORT	L. T. Day, M.D.	Westport.
WILTON	A. B. Gorham, M.D.	Wilton.

CITY HEALTH OFFICERS.

BRIDGEPORT.....	E. A. McLellan, M.D.
DANBURY	G. E. Lemmer, M.D.
NORWALK	W. J. Tracey, M.D.
SOUTH NORWALK.....	W. J. Tracey, M.D.
STAMFORD	J. F. Rowell, M.D.

BOROUGH HEALTH OFFICERS.

BETHEL	A. E. Barber, M.D.
GREENWICH	L. P. Jones, M.D.
NEW CANAAN	C. B. Keeler, M.D.
SHELTON	G. A. Shelton, M.D.

WINDHAM COUNTY.

William A. King, Esq., County Health Officer, Willimantic.

BROOKLYN	A. H. Tanner, M.D.	Brooklyn.
ASHFORD	F. B. Converse, M.D.	Westford.
CANTERBURY	J. O. Smith, M.D.	South Canterbury.
CHAPLIN	F. C. Lummis	Chaplin.
EASTFORD	E. K. Robbins, M.D.	Eastford.
HAMPTON	L. W. Spencer, M.D.	Hampton.
KILLINGLY	W. H. Judson, M.D.	Danielson.
PLAINFIELD	W. W. Adams, M.D.	Moosup.
POMFRET	Chas. O. Thompson	Pomfret.
PUTNAM	Omer LaRue, M.D.	Putnam.
SCOTLAND	A. M. Clark	Scotland.
STERLING	O. W. Bates	Oneco.
THOMPSON	L. Holbrook, M.D.	Thompson.
WINDHAM	F. E. Wilcox, M.D.	Willimantic.
WOODSTOCK	Joseph Spaulding, M.D.	Woodstock.

CITY HEALTH OFFICER.

WILLIMANTIC A. J. Crighton, M.D.

BOROUGH HEALTH OFFICER.

DANIELSON W. H. Judson, M.D.

LITCHFIELD COUNTY.

F. W. Etheridge, Esq., County Health Officer, Thomaston.

LITCHFIELD	C. I. Page, M.D.	Litchfield.
BARKHAMSTED	H. B. Case	Barkhamsted.
BETHLEHEM	E. L. Smith, M.D.	Hotchkissville.
BRIDGEWATER	G. H. Wright, M.D.	New Milford.
CANAAN	F. S. Skiff, M.D.	Falls Village.
COLEBROOK	H. L. Culver	Winsted, Station A.
CORNWALL	Wm. M. Curtiss, M.D. ..	Cornwall Bridge.
GOSHEN	J. H. North, M.D.	Goshen.
HARWINTON	C. L. Blake, M.D.	Harwinton.
KENT	J. F. Gibbs	Kent.
MORRIS	H. C. Alvord	Morris.
NEW HARTFORD	J. Swett, M.D.	New Hartford.
NEW MILFORD	J. C. Barker, M.D.	New Milford.
NORFOLK	J. C. Kendall, M.D.	Norfolk.
NORTH CANAAN	C. W. Camp, M.D.	Canaan.
PLYMOUTH	T. G. O'Connell, M.D. ..	Thomaston.
ROXBURY	L. J. Pons, M.D.	Roxbury.
SALISBURY	W. B. Bissell, M.D.	Lakeville.
SHARON	R. P. Knight, M.D.	Sharon.
THOMASTON	T. St. John, M.D.	Thomaston.
TORRINGTON	E. Pratt, M.D.	Torrington.
WARREN	Wm. Forestelle	Warren.
WASHINGTON	R. Marcy, M.D.	New Preston.
WATERTOWN	W. S. Munger, M.D.	Watertown.
WINCHESTER	S. G. Howd, M.D.	Winsted.
WOODBURY	E. L. Smith, M.D.	Hotchkissville.

BOROUGH HEALTH OFFICERS.

LITCHFIELD	C. I. Page, M.D.
TORRINGTON	E. Pratt, M.D.
WINSTED	S. C. Wheeler.

MIDDLESEX COUNTY.

Wesley U. Pearne, Esq., County Health Officer, Middletown.

MIDDLETOWN	J. H. McDougall, M.D. . .	Middletown.
CHATHAM	E. S. Parmelee, M.D. . .	Cobalt.
CHESTER	S. W. Turner, M.D.	Chester.
CLINTON	H. S. Reynolds, M.D. . .	Clinton.
CROMWELL	C. E. Bush, M.D.	Cromwell.
DURHAM	E. A. Markham, M.D. . .	Durham.
EAST HADDAM	M. W. Plumstead, M.D. . .	Moodus.
ESSEX	Alonzo Shaffer, M.D. . .	Essex.
HADDAM	Leroy A. Smith, M.D. . .	Higganum.
KILLINGWORTH	E. P. Nichols, M.D.	Killingworth.
MIDDLEFIELD	J. E. Bailey, M.D.	Middletown.
OLD SAYBROOK	J. H. Granniss, M.D. . .	Saybrook.
PORTLAND	F. E. Potter, M.D.	Portland.
SAYBROOK	H. T. French, M.D.	Deep River.
WESTBROOK	T. B. Bloomfield, M.D. .	Westbrook.

CITY HEALTH OFFICER.

MIDDLETOWN

J. H. McDougall, M.D.

TOLLAND COUNTY.

Edward M. Yeomans, Esq., County Health Officer, Andover.

TOLLAND	E. S. Agard	Tolland.
ANDOVER	S. L. French	Andover.
BOLTON	C. F. Sumner, M.D.	Bolton.
COLUMBIA	W. H. Yeomans	Columbia.
COVENTRY	C. E. Simonds, M.D.	South Coventry.
ELLINGTON	E. T. Davis, M.D.	Ellington.
HEBRON	C. H. Pendleton, M.D. .	Hebron.
MANSFIELD	E. G. Sumner, M.D. . .	Mansfield Center.
SOMERS	A. L. Hurd, M.D.	Somers.
STAFFORD	F. L. Smith, M.D.	Stafford Springs.
UNION	E. W. Upham	Union.
VERNON	A. R. Goodrich, M.D. . .	Vernon.
WILLINGTON	G. A. Cosgrove	Willington.

CITY HEALTH OFFICER.

ROCKVILLE

T. F. O'Loughlin, M.D.

BOROUGH HEALTH OFFICER.

STAFFORD SPRINGS

F. L. Smith, M.D.

EXAMINING COMMITTEES OF THE STATE MEDICAL SOCIETIES.

COMMITTEE OF THE CONNECTICUT MEDICAL SOCIETY.

Name.	Address.	Term Expires.
Dr. J. W. WRIGHT	Bridgeport	Jan. 1901
Dr. H. S. FULLER	Hartford	" 1902
Dr. C. A. TUTTLE	New Haven	" 1903
Dr. W. L. BARBER	Waterbury	" 1901
Dr. J. F. CALEF	Middletown	" 1905

COMMITTEE OF THE CONNECTICUT HOMEOPATHIC MEDICAL SOCIETY.

Name.	Address.	Term Expires.
Dr. HARLAN P. COLE	Hartford	Jan. 1901
Dr. CHAS. E. SANFORD	Bridgeport	" 1902
Dr. EDW. B. HOOKER	Hartford	" 1903
Dr. E. C. M. HALL	New Haven	" 1904
Dr. E. H. LINNELL	Norwich	" 1905

COMMITTEE OF THE CONNECTICUT ECLECTIC MEDICAL ASSOCIATION.

Name.	Address.	Term Expires.
Dr. GEO. A. FABER	Waterbury	Jan. 1901
Dr. HENRY BICKFORD	Hartford	" 1902
Dr. THOS. S. HODGE	Torrington	" 1903
Dr. LEONARD BAILEY	Middletown	" 1904
Dr. THOS. MULLIGAN	New Britain	" 1905

ALPHABETICAL LIST

(Continued from last Report.)

OF THE MEDICAL PRACTITIONERS IN CONNECTICUT WHO HAVE COMPLIED
WITH THE LAW PASSED BY THE GENERAL ASSEMBLY OF 1893,
RELATING TO THE REGISTRATION OF PHYSICIANS,
SURGEONS AND MIDWIVES.

The following is a full list of all who have registered between the 1st day of October,
1899, and October 1st, 1900.

When no post office address is given, it is understood to be the place where registered.

Name.	Where Registered.	P. O. Address.
Avery, Amos	Norwich.	
Beach, Oliver J.	Granby.	
Black, John T.	Norwich.	
Brodzik, Mary	New Britain.	
Budau, John H. D.	Bridgeport.	
Cohane, Jeremiah J.	Norwich.	
Driscoll, Daniel M.	Griswold.	
Dundon, Arthur H.	Bridgeport.	
English, Richard M.	Bridgeport.	
Ferguson, Robert J.	New Haven.	
Fitzsimmons, Joseph E.	Waterbury.	
Freligh, Clark A.	Thompson.....	Nashua, N. H.
Gandy, Raymond R.	Colchester.	
Guinan, Joseph C.	Hartford.	
Harper, Francis J.	Norwich.	
Healy, Wm. P.	Bridgeport.	
Heery, Francis P.	New Haven.	
Heilig, Frida K.	New Haven.	
Henkle, Emanuel A.	Montville.	
Henn, Louis D.	New Britain.	
Ives, John W.	Goshen.	
Keating, Wm. P. S.	Willimantic.	
Kiernan, Walter H.	Danbury.	
King, Howard F.	Windsor.	
Ladin, Michael R.	Wallingford.	
Lathrop, Samuel S.	Norwich.	
Maguire, Edward O'R.	Derby.	
Mann, Thomas H.	Montville.	
McLaughlin, Andrew J.	Norwich.	

Meagher, Wm. F.	Hartford.
Monahan, David H.	Southington.
Moore, Harry H.	Suffield..... W. Warren, Mass.
North, Carrie	Goshen.
Owens, Wm. T.	East Canaan.
Roberts, Herbert A.	Derby.
Rowell, Edward E., Jr.	Stamford.
Sharpe, Harry R.	Bristol.
Sloan, Thomas G.	New Haven.
Steiner, Walter R.	Hartford.
Stevenson, Wm. J.	Norwalk.
Tanner, John C.	Manchester.
Teele, Julia E.	New Haven.
Thibault, Louis J.	Waterbury.
Thurber, Herbert T.	Killingly Providence, R. I.
Wadhams, Noah S.	New Haven.
Wagner, John J.	Greenwich.
Wainwright, Jonathan M.	Hartford.
Wheale, Sarah	Bridgeport.
White, Sarah J.	Farmington.
Williams, Dudley A.	Middletown.

REPORT OF THE DENTAL COMMISSIONERS OF
CONNECTICUT.

RECORDER'S OFFICE,

HARTFORD, FEBRUARY 1, 1901.

To the Honorable State Board of Health:

GENTLEMEN:—In compliance with the provisions of Chapter CXXX of the Acts of the General Assembly of 1893, I hereby present for your consideration my annual report since March 16, 1900.

Respectfully,

GEO. L. PARMELE, M.D., D.M.D.,

Dental Commissioner and Recorder.

DENTAL COMMISSIONERS OF CONNECTICUT.

Appointed by his Excellency, George E. Lounsbury, Governor of Connecticut, July 1, 1899, to hold office for two years:

William J. Rider of Danbury.

Richard W. Browne, D.D.S., of New London.

Charles P. Graham of Middletown.

George L. Parmele, M.D., D.M.D., of Hartford.

Charles B. Baker of Bridgeport.

The Commission organized by electing Charles P. Graham President, and George L. Parmele Recorder.

REPORT.*To the Honorable State Board of Health:*

GENTLEMEN:—The Dental Commissioners of the State beg leave to present the following brief report required by statute.

There have been two examinations of candidates for license to practice dentistry, under the rules adopted by this Commission in November, 1899, a copy of which is transmitted herewith: one in May and the other in November, 1900.

At the first, held in the Capitol at Hartford, May 14th and 15th, 1900, the full Commission was present.

The first day was devoted to the "Practical Examination," the second to the written "Theoretical Examination." At the

end of the second day's session the Commission adjourned to meet at New Haven, May 26th, to decide upon the eligibility of the candidates after a thorough examination of their written answers.

May 26th, the full Commission being present, and upon vote being taken as to their standing, the following candidates having attained a standing of 70 per cent. or over were granted licenses.

Herbert D. Ayers, D.D.S., N. Y. Coll., 1900. Norwalk.
 William E. Boucher, D.D.S., Balt. C. D. S., 1900. Hartford.
 Frank L. Davis, D.D.S., Phil. D. C., 1900. Bridgeport.
 Edward W. Jarvis, D.D.S., Penn. D. C., 1900. Portland.
 Charles S. Murlless, Holyoke, Mass.
 Friend A. Phelps, New Haven.
 Charles W. Roberts, D.D.S., Phil. D. C., 1900. Hartford.
 George W. Putnam, D.D.S., N. Y. Coll., 1899. New Haven.
 George F. Stearns, D.D.S., Phil. D. C., 1900. New Britain.
 Mary L. Warren, D.D.S., Phil. D. C., 1900. Hartford.
 Thomas H. Charmbury, D.D.S., D. Dpt. Balt. Med., 1900. Seymour.
 Erle C. Curtis, D.D.S., Penn. D. C., 1900. Hartford.
 Victor A. Vores, D.D.S., Penn. D. C., 1900. Danbury.

The following having made application prior to January 1, 1900, were admitted under the old ruling :

William S. Barber, D.D.S., N. Y. D. Coll., 1896. Stonington.
 Thomas F. Baxter, D.D.S., Nat. U., 1899. Naugatuck.
 John H. Benedict, Danbury.
 Burton F. Bishop, D.D.S., U. of Penn., 1899. Westville.
 Charles P. Blinn, D.D.S., U. of Penn., 1899. Torrington.
 John C. F. Bridge, D.D.S., Bost. D. C., 1892. Rockville.
 Frederic H. Camp, D.D.S., U. of Penn., 1899. New Britain.
 Albert Cowee, D.D.S., U. of Penn., 1899. Hartford.
 Arthur E. Davenport, D.D.S., N. Y. D. Coll., 1890. New Haven.
 A. E. Guptill, D.D.S., Balt. D. C., 1897. Hartford.
 John E. Heyke, D.D.S., U. of Penn., 1899. New Haven.
 Thomas J. King, D.D.S., Phil. D. C., 1891. Hartford.
 John L. Mansir, D.D.S., Phil. D. C., 1899. Great Barrington, Mass.
 Oliver T. Rule, D.D.S., U. of Penn., 1899. Wallingford.
 Arthur M. Sweet, D.D.S., U. of Md., 1899. Essex.
 Herman Tropp, D.D.S., U. of Md., 1899. New York City.
 Howard S. Williams, D.D.S., U. of Penn., 1899. Meriden.
 Charles I. Winne, D.D.S., U. of Penn., 1899. Essex.

Eight were refused a license.

As the two days' session of the May meeting put too severe a strain upon the candidates, the Commission arranged for a three days' session, November 13th, 14th and 15th, 1900; the first two days being devoted to the written "Theoretical Examinations," the final to the practical operations.

The eight candidates presenting themselves were examined by all the Commissioners, and were by far, as a whole, the best class thus far examined, and all attained a general average percentage of over 70. Licenses were granted as follows:

William E. Lindstedt, D.D.S., N. Y. D. Coll., 1880.	Greenwich.
Fred. Wallace,	Hartford.
Blake A. Sears, D.D.S., U. of Penn., 1896.	Hartford.
Russell E. Morgan,	East Norwalk.
Harry W. Sharpe,	Putnam.
B. F. Henchey, D.D.S., U. of Penn., 1900.	Torrington.
John L. Sullivan, D.D.S., Phil. D. C., 1900.	Willimantic.
William B. Wheeler, D.D.S., U. of Penn., 1900.	Waterbury.

LEGAL RIGHT ISSUED TO

Charles E. Prange of Stamford,

He having submitted seven affidavits that he was engaged in the practice of dentistry at the time of the passage of the law concerning dentistry.

Respectfully,

GEO. L. PARMELE, M.D., D.M.D.,
Recorder.

DENTAL COMMISSIONERS OF CONNECTICUT.

OFFICE OF THE RECORDER,

65 PRATT STREET, HARTFORD.

RULES AND INSTRUCTIONS TO CANDIDATES.

Every candidate for license must be twenty-one years of age. He must fill out an application blank, which together with his license fee—twenty-five dollars (\$25.00)—must be returned to the Recorder at least one week before the day upon which the examination is to take place. Blanks can be obtained from the Recorder. Twenty dollars (\$20.00) will be returned if the candidate is rejected.

Every applicant for license, whether graduate or non-graduate, will be required to pass a thorough examination, both practical and theoretical, and all rules conflicting herewith are hereby repealed.

PRACTICAL EXAMINATION.

Operative—Each applicant must bring a patient for whom an approximal cavity is to be prepared and filled with gold, in the presence of the Commissioners—foil only to be used. Rubber dam, gold, and all other instruments and materials, for this demonstration of his skill, must be provided by the candidate;* chairs and tables only being furnished by the Commission.

Prosthetic—Each applicant must present a full upper set on rubber plate, also a partial plate of three or four teeth; made on silver, soldered with silver solder, plain or gum teeth in either case.

Affidavits (blanks to be had of Recorder) will be required from patient and applicant that all work submitted is the unaided individual work of the candidate.

THEORETICAL EXAMINATION.

1. Anatomy, physiology and histology.
2. Chemistry and metallurgy, materia medica and therapeutics.
3. Dental and oral pathology, medicine and surgery.
4. Operative dentistry and orthodontia.
5. Prosthetic dentistry and crown and bridge work.

Applicants should bring such pens as they prefer, as answers are to be written in ink.

GEO. L. PARMELE, M.D., D.M.D.,
Dental Commissioner and Recorder.

OFFICE OF THE RECORDER,
65 PRATT ST., HARTFORD,
JANUARY 1, 1900.

RULES GOVERNING TEMPORARY PERMITS.

The Recorder has power to grant to dentists holding diplomas from reputable schools, upon payment of the fee, temporary permit to practice until the next meeting of the Commissioners, at which time they must appear in person.

It must be distinctly understood by all applicants who receive a temporary permit after January 1, 1900, that the examination passed to obtain the same does not exempt them from passing the regular examination for license at the next meeting of the Commission.

Governing Application for Temporary Permit:

- (a) All applicants for temporary permit will apply to the Recorder for application blanks, for license.

*Candidates who do not desire to bring their own dental engine may be able to rent one by making early arrangements with William C. Messenger, Dental Depot, 96 Trumbull Street, Hartford.

- (b) Fill these out giving every detail.
- (c) Submit these blanks and his diploma to any Dental Commissioner, who will issue to him a certificate of eligibility.

He must then pass the following Practical Examination:

- (d) Operative. Each applicant for a temporary permit must present a patient for whom he has operated, to Commissioner Rider at Danbury, showing at least two gold and two amalgam fillings, all in approximal cavities.
- (e) Prosthetic. Each applicant must present to Commissioner Graham at Middletown, a full upper set on rubber plate, also a partial plate of three or four teeth; made on silver, soldered with silver solder, plain or gum teeth in either case.
- (f) Affidavits will be required that all work submitted is the unaided, individual work of the candidate.

Forward them to the Recorder: Both application blanks. Certificate of eligibility. The certificate of examination. License fee, \$25. Pledge to appear.

The Recorder will upon receipt of these documents issue a temporary permit.

GEO. L. PARMELE, *Recorder.*

TREASURER'S REPORT.

FROM SEPTEMBER 30, 1899, to OCTOBER 1, 1900.

[Verified by vouchers on file in Comptroller's office.]

The Treasurer begs leave to report the following statement of moneys received from the Comptroller on account of the State Board of Health, and of expenditures from September 30, 1899, to October 1, 1900.

RECEIPTS.

1899.		
Oct.	1. By cash from Comptroller	\$ 875.00
1900.		
Feb.	1. By cash from Comptroller	875.00
May	9. By cash from Comptroller	875.00
Aug.	2. By cash from Comptroller	875.00
	Salary of Secretary	1,800.00
		<hr/>
		\$5,300.00

DISBURSEMENTS.

For traveling and other necessary expenses of members		
	of Board when on duty	\$ 259.35
	Books and subscriptions to sanitary literature....	93.79
	Printing, binding and stationery	1,253.03
	Office expenses	31.31
	Clerical assistance in Secretary's office.....	996.00
	Postage	92.50
	Insurance	4.50
	Fuel	12.30
	Express charges and messengers	16.48
	Repairing stoves	4.03
	Telephone rent and long distance tolls.....	83.45
	Services of Scientific Expert	98.73
	Assessment to Nat. Con. State Bd of Health...	10.00
	Gas for year ending October 1, estimated.....	25.00
	Meteorological summary—monthly	24.00
	Rent of office	480.00
	Salary of Secretary	1,800.00
		<hr/>
		\$5,284.47
	To balance	15.53
		<hr/>
		\$5,300.00

C. A. LINDSLEY, *Treasurer.*

THE ACCOUNT RELATING TO THE INVESTIGATION OF WATER.

The Treasurer begs leave to report the following statement of moneys received from the Comptroller, and of expenditures on account of the investigation of the natural waters of the State, for the fiscal year ending September 30th, 1900.

[Verified by vouchers on file in Comptroller's office.]

RECEIPTS.

1899.	
October.	By cash from Comptroller \$625.00
Feb.	By cash from Comptroller 625.00
April.	By cash from Comptroller 625.00
August.	By cash from Comptroller 625.00
<hr/>	
\$2,500.00	

DISBURSEMENTS.

Paid charges collecting samples, traveling expenses,	
etc.	\$ 56.31
Adams Express Co. for transportation	125.82
For apparatus and laboratory supplies	118.83
For gas and water	60.00
Prof. H. E. Smith and assistants as per contract	1,839.98
Prof. H. E. Smith for extra expert services....	75.00
<hr/>	
\$2,275.94	
Cash on hand—to balance	224.06
<hr/>	
\$2,500.00	

Attest: C. A. LINDSLEY, *Treasurer.*

ADDITIONS TO THE LIBRARY.

Books and Pamphlets.

- Agriculture, Report of the Secretary of, 1900.
Air, Water and Food from a Sanitary Standpoint, by Richards and Woodman.
Boston, Mass., 28th Annual Report of the Health Department of the City of, 1899.
Burlington, Vt., Annual Report of the Health Officer of, 1899.
Chicago, Ill., Biennial Report of the Department of Health of the City of, 1897-1898.
City Garbage and Refuse, Its Disposal and Conversion into Power.
Cleveland, Ohio, 27th Annual Report of the Public Health Division of the Department of Police, 1899.
Coldwater, Michigan, Annual Report of the Health Officer of, 1899.
Commission of Public Records, Report of, 1900.
Commissioner of Labor, 14th Annual Report of, 1899.
Conference of State and Provincial Boards of Health of North America, Proceedings of the 15th Annual Meeting of, 1900.
Connecticut Medical Society, Proceedings of, 1900.
Connecticut, Report of the State Board of Education, 1900.
Dangers to Health and Life from Abuse of Water in North America.
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State of Connecticut.
PUBLIC DOCUMENT No. 9

ANNUAL REPORT
OF THE
Bureau of Vital Statistics
OF THE
State of Connecticut
REGISTRATION REPORT.

FOR THE
YEAR ENDING SUNDAY, DECEMBER 31, 1899

NEW SERIES—No. 22

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OFFICE OF THE BUREAU OF VITAL STATISTICS, }
STATE HOUSE, HARTFORD, NOV. 30, 1900. }

To his Excellency GEORGE E. LOUNSBURY, *Governor of the State*
of Connecticut :

SIR :—In accordance with the laws of this State, I have the honor to submit to you the detailed abstracts of the Births, Marriages, Divorces, and Deaths, that were registered in Connecticut in the year 1899, together with a few suggestions and inferences on the main features of the Vital Statistics of that year.

I have the honor to be

Your very obedient servant,

C. A. LINDSLEY, M.D.,

Superintendent of Registration of Vital Statistics.

REGISTRATION REPORT, 1899.

To his Excellency GEORGE E. LOUNSBURY, *Governor of Connecticut :*

SIR:—In the following report is presented a tabulated statement of some of the facts, interesting and instructive, that can be best expressed by numbers. It consists of numerical statements of the prominent items of interest, relating to the Births, Marriages, Divorces and Deaths happening during the year in the commonwealth of Connecticut.

These numbers respecting each event are grouped together in various ways, so that they may be observed from different points of view, with reference to locality, age, sex, occupation and disease. The numerical analysis of large numbers of kindred facts leads to the discovery of natural laws and to many interesting and profitable results. Large numbers of single facts when properly classified contribute far more to the advancement of science than they possibly can do when collected in isolated masses. "Science is classified knowledge." "Statistics is the observation of phenomena which can be counted or expressed in figures."

This method of arranging numerically the three great events in a human life is called vital statistics. The value of vital statistics depends upon accuracy and completeness. These in turn depend so much upon the coöperation of almost every member of a community for the needed information, that the satisfactory assembling of vital statistics has always been difficult, often impossible. The earliest registration act in Connecticut was enacted in Colonial times in 1644. When it was "Ordered that the Town Clarkes or Registers in the seueral Townes within this jurisdiction, shall ech of them keepe a record of the day of marriedge of euery p'son hereafter married w'thin theise libertyes, and of the day of the birth of euery child hereafter borne, to who the parent of the child shall w'thin three days after the birth of his child certifie the day of the childs birth, and to who every man that shall be married shall w'thin three dayes after his marriedge certifie his marriedge day under the penalty of 5s, euery default."

Under modified forms, the registration of births, marriages and deaths have been constantly on the Statutes of Connecticut since 1644, although much of the time disregarded in many parts of the State. But the laws now are very closely observed.

Connecticut anticipated the legislation of England on this subject by a long period. It was not until July 1st, 1837, that the first Registration Act of England went into effect.

Some years after a writer in the London Lancet said : "This was the most important sanitary measure ever adopted in England. Before that time a perfect chaos respecting population and mortality reigned. Since then a mass of statistics, relating to life, health and disease has been accumulating, which will exert and is exerting an immensely beneficial influence upon the physical and moral welfare of these realms, and indeed ultimately upon every people on the face of the globe.

The discoveries of Astronomy have not a more palpable application to navigation and commerce, than have the statistics of health and disease, to physical and moral regeneration.

The analysis of Vital Statistics, considered in their relations to social life, lies at the foundation of all scientific enquiry, and affords the only reliable means of estimating sanitary progress."

"Vital Statistics," says Chaille, "furnish most unerring lessons as to the health, prosperity, and morals of the people ; they teach the influence of marriage on illegitimacy and morality, the vital force of the children, the duration of life with its expectation and value for all ages and races, the influence of meteorology, occupation, and locality in generating disease and improving health, and thereby the removal of unfavorable conditions often found where least suspected, and the approach of morbid storms, by ignorance of which negligent cities and even nations have been destroyed. The only foundation of life insurance, vital statistics serve alike to guide the resident and the immigrant, the capitalist and the laborer, the politician and the statesman, the moralist and the scientist. Ignored or disparaged too often, they have been advocated and supported by Napoleon and Thiers, by Bismarck and Cavour, by Gladstone and Disraeli, and their establishment has become a test of the degree of civilization reached by a people and their rulers."

Newsholme in a recent work entitled "The Elements of Vital Statistics," says : "The registration of causes of death has given an immense impetus to sanitary work, and it is scarcely too much

to say that modern sanitary science owes its existence to the registration of deaths and their causes, and the localization of unsanitary conditions, thereby insured."

The foregoing testimony from such high authority ought to silence the cavilling, carping critics who declare their ignorance, in asserting that "The registration of the Vital Statistics of Connecticut is a needless expense." "They are of no use." "Nobody reads them," etc.

The following is a general summary of the Births, Marriages and Deaths as registered in 1899 :

SEX.		BIRTHS.		PARENTAGE.	
Males.....	10,739	American	8,299	One or both Foreign	12,260
Females.....	10,026	Not stated.....	296		
Not stated.....	90				
Total	20,855	Total	20,855		
Whole number of Births		20,855			
Birth-rate per 1,000		22.6			

MARRIAGES.	
Both parties American	3,715
Both parties Foreign	1,977
Husband American, wife Foreign	554
Husband Foreign, wife American	594
Not stated	3
Total Marriages	6,843
Total number of persons married	13,686

SEX.		DEATHS.		NATIVITY.	
Males.....	7,357	American	10,388	Foreign	3,678
Females.....	7,020	Not stated.....	315		
Not stated.....	4				
Total	14,381	Total	14,381		
Whole number of Deaths		14,381			
Death-rate per 1,000		15.7			
There was one birth to every		43.7 persons.			
There was one marriage to every		133.2 "			
There was one person married to every		66.6 "			
There was one death to every		63.4 "			

The total number of births registered in Connecticut during the year 1899 was 20,855 ; of deaths, 14,381 ; so that the natural increase of population by excess of births over deaths was 6,474.

TOWNS IN WHICH THE DEATHS EXCEEDED THE BIRTHS.

The registration of the Vital Statistics of the State is always conducted townwise. Although cities and boroughs are often included within town limits, their population for death-rates, birth-rates, etc., are counted as part of the population in which they are respectively located.

In 41 towns the deaths exceeded the births. The total excess of deaths over births in these towns, or the natural loss of population, was 240. The loss in this way was 86 more than in the previous year.

In 18 towns of less than 1,000 inhabitants the loss was.....	85
In 15 towns of between 1,000 and 2,000 inhabitants the loss was..	111
In 3 towns of between 2,000 and 3,000 inhabitants the loss was....	22
In 5 towns of 3,000 inhabitants the loss was.....	22
Total.....	240

In 7 towns the births and deaths were equal, to wit : Bethany, Bloomfield, Bozrah, Chester, Hartland, Litchfield, Prospect.

In 127 towns the births exceeded the deaths.

The towns in which registration shows an excess of deaths over births are the following, arranged by counties :

HARTFORD COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
East Granby.....	700	10	6	4
Newington.....	1,000	22	15	7
Rocky Hill.....	1,100	24	14	10
Simsbury.....	2,000	45	42	3
	4,800	101	77	24

NEW HAVEN COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Beacon Falls.....	800	14	12	2
Cheshire.....	1,900	29	22	7
Madison.....	1,500	26	19	7
Milford.....	3,800	65	63	2
North Branford.....	800	21	14	7
Oxford.....	1,000	17	12	5
	9,800	172	142	30

NEW LONDON COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Franklin.....	580	10	9	1
Preston.....	2,560	39	35	4
	3,140	49	44	5

FAIRFIELD COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Brookfield.....	950	25	16	9
Easton.....	1,000	18	10	8
Monroe.....	950	16	13	3
New Canaan.....	3,000	37	35	2
New Fairfield.....	650	11	7	4
Newtown.....	3,350	66	55	11
Sherman.....	650	13	11	2
Stratford.....	3,300	77*	71	6
Trumbull.....	1,500	29	16	13
Weston.....	800	13	12	1
Wilton.....	1,700	33	29	4
	<hr/> 17,850	<hr/> 338	<hr/> 275	<hr/> 63

WINDHAM COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Ashford.....	675	19	16	3
Canterbury.....	800	27	11	16
Chaplin.....	550	9	8	1
Eastford.....	600	11	10	1
Scotland.....	475	11	3	8
	<hr/> 3,100	<hr/> 77	<hr/> 48	<hr/> 29

LITCHFIELD COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Canaan.....	800	25	15	10
Colebrook.....	850	14	9	5
Harwinton.....	1,200	30	27	3
Kent.....	1,200	31	19	12
Salisbury.....	3,500	55	54	1
	<hr/> 7,550	<hr/> 155	<hr/> 124	<hr/> 31

MIDDLESEX COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Clinton.....	1,400	30	14	16
East Haddam.....	2,600	53	38	15
Middlefield.....	1,000	20	19	1
Saybrook.....	1,500	31	29	2
Westbrook.....	850	22	15	7
	<hr/> 7,350	<hr/> 156	<hr/> 115	<hr/> 41

TOLLAND COUNTY.

Towns.	Population.	Deaths.	Births.	Loss.
Coventry.....	1,750	30	20	10
Mansfield.....	1,911	32	26	6
Union.....	425	9	8	1
	<hr/> 4,086	<hr/> 71	<hr/> 54	<hr/> 17

* 26 deaths due to Trolley Accident.

The following table gives a summary of the Vital Statistics of the State from 1848, the date of the first Registration Report, up to the present time. In the year 1852 no Report of Vital Statistics was published.

TABLE I.
VITAL STATISTICS FROM 1848 TO 1899.

Year.	Births.	Birth-rate per 1,000.	Marriages.	Deaths.	Death-rate per 1,000.	Excess of Births over Deaths.	Divorces.	No. Marriages to each Divorce.
1848	6,850	20	2,816	4,379	12.4	2,471	---	---
1849	7,238	20	2,920	5,049	14	2,189	---	---
1850	7,578	20.4	2,884	5,170	14	2,408	---	---
1851	8,362	22	2,995	4,767	13	3,595	---	---
1853	8,302	21.4	3,136	5,596	14.4	2,706	---	---
1854	8,439	21.3	3,202	5,646	14.2	2,793	---	---
1855	10,012	24	4,286	6,094	14.6	3,918	---	---
1856	11,139	25	4,089	6,324	14.9	4,815	---	---
1857	11,355	26	3,647	6,585	16	4,770	---	---
1858	11,299	25	3,737	6,618	15.6	4,681	---	---
1859	11,259	25	3,778	6,533	15	4,726	---	---
1860	11,873	26	4,036	7,602	16.3	4,271	310	13
1861	11,934	25	3,757	7,735	16.5	4,199	275	13.9
1862	10,803	23	3,701	8,541	18	2,262	257	14
1863	9,885	21	3,467	8,442	18	1,443	291	12
1864	9,734	20	4,107	9,109	19	625	426	9.6
1865	10,202	20.8	4,460	7,950	16	2,252	404	11
1866	10,623	23	4,978	7,520	15	4,103	488	10
1867	12,029	23.2	4,779	7,343	14.3	4,686	459	10.4
1868	12,469	23.4	4,734	7,549	15	4,920	478	9.9
1869	12,481	23.5	4,754	8,417	15.6	4,064	491	9.6
1870	13,136	24.2	4,871	8,895	15	4,241	408	11.9
1871	13,114	24	4,882	8,166	14.2	4,948	409	11.9
1872	13,805	25.3	5,023	9,970	18	3,835	464	10.8
1873	14,087	25.6	4,841	9,822	17.4	4,265	457	10.6
1874	14,450	26.2	4,694	8,939	17.2	5,511	492	9.6
1875	14,328	26	4,535	9,883	17	4,495	476	9.4
1876	13,800	25	4,320	10,187	17.5	3,613	396	10.9
1877	14,072	26	4,319	9,696	16	4,376	427	10.1
1878	13,499	24	4,315	9,352	15	4,147	401	10.7
1879	14,051	22.4	4,373	9,394	15	4,657	316	13.7
1880	13,829	22.2	4,745	10,408	16.7	3,421	332	14.2
1881	14,616	22.4	4,850	10,907	17.4	3,709	404	12
1882	14,938	23.9	5,329	11,622	18.7	2,316	292	13.5
1883	15,856	25.4	5,440	11,943	19.1	3,913	433	12.6
1884	15,758	23	5,394	11,351	16.6	4,407	360	14.7
1885	15,496	22.7	5,091	12,013	17.6	3,463	383	13.3
1886	15,934	22.2	5,497	11,616	16.2	4,318	387	14.2
1887	16,583	22.8	5,788	12,385	17	4,198	387	14.9
1888	16,878	22.2	5,969	12,980	17.1	3,898	430	13.8
1889	17,176	23.4	5,744	12,529	17	4,647	536	10.7
1890	17,394	23.3	6,284	13,665	18.3	3,729	477	13.1
1891	18,557	24.8	6,486	14,385	19.2	4,172	475	13.6
1892	19,750	24.7	6,596	15,170	19	4,580	501	13.1
1893	20,296	25.4	6,459	14,901	18.6	5,395	390	16.5
1894	20,345	24.9	5,830	13,699	16.8	6,646	367	15.8
1895	19,931	24.4	6,623	14,546	17.8	5,385	417	15.8
1896	21,324	24.9	6,716	15,025	17.5	6,299	462	14.5
1897	20,580	23.3	6,461	13,915	15.7	6,665	403	16.0
1898	21,023	23.5	6,565	14,170	15.8	6,853	429	15.3
1899	20,855	22.6	6,843	14,381	15.7	6,474	431	15.8

BIRTHS, MARRIAGES AND DEATHS IN THE SEVERAL TOWNS FOR THE YEAR ENDING DECEMBER 31, 1899.

TOWNS.	BIRTHS.						MARRIAGES.						DEATHS.																	
	Estimated Population.	SEX.		Birth-rate per 1000.	PARENTAGE.				NATIVITY.						SEX.		NATIVITY.		Death-rate per 1000.											
		Male.	Female.		Total.	Both American.	Both Foreign.	Amer. Father.	Amer. Mother.	Amer. Father & Mother.	Both diff. Nations.	Not stated.	Both American.	Both Foreign.	Husb. American.	Wife Foreign.	Husb. Foreign.	Wife American.		Not stated.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Foreign.	American.		
Hartford	77,085	945	953	15	1913	24.8	661	880	136	137	137	74	25		377	243	60	66		746	88	111	765	784	1	*1550	1084	432	34	19.1
Avon	1,200	9	5	14	11.7	5	5	5	4	4	4	2	2		2	2	3	1		2	2	2	7	4	11	8	3	3	8	9.2
Berlin	3,000	24	29	53	17.5	20	23	2	2	7	1	1	1	2	6	11	2	3	1	17	3	5	18	25	22	47	39	8	15.7	
Bloomfield	1,400	11	20	31	22.1	16	11	1	1	1	2	6	2		6	2	3			6	2	1	18	13	31	24	6	1	22.2	
Bristol	9,000	114	96	210	23.4	72	101	16	14	5	2	31	20	3	59	9	6	5		59	9	6	59	72	131	106	24	1	14.5	
Burlington	1,200	16	15	32	26.5	11	17	3	1	1	1	6	1		7	3	3			7	3	3	6	3	9	6	3	7.5		
Canton	2,600	27	19	47	18.0	14	25	3	2	2	1	9	10	3	24	2	10	2		24	2	10	19	13	32	25	5	2	12.3	
East Granby	700	3	2	6	8.5	5	1					2	1		2	2				2	1		5	5	10	8	1	1	14.3	
East Hartford	6,700	63	72	135	20.1	76	31	11	9	6	2	35	9	1	49	17	6	4		49	17	6	62	44	106	84	21	1	15.8	
East Windsor	2,850	43	36	79	27.7	39	19	7	11	1	2	7	7	3	18	4	1	4		18	4	1	28	14	42	30	11	1	14.7	
Enfield	8,000	76	73	149	18.6	62	40	19	22	6	1	50	10	3	73	14	22	3		73	14	22	55	48	103	59	43	1	12.8	
Farmington	3,200	26	31	57	17.8	31	14	4	7	1	1	17	3	1	21	8	4	3		21	8	4	21	26	47	32	14	1	14.7	
Glastonbury	3,600	42	49	91	25.2	43	30	6	7	5	1	15	3	2	1	21	5	2	1	21	5	2	17	44	61	48	10	3	17.0	
Granby	1,250	16	7	23	18.0	22						5	1		5	1	2			5	1	2	9	9	18	18	1	1	14.4	
Hartland	600	5	6	11	18.3	8	3	3	3	3	3	2	2		2	2				2			8	3	11	10	1	1	18.3	
Manchester	10,000	67	81	149	14.9	36	76	15	13	6	3	33	27	7	78	11	8	54	54	108	71	33	4	108	71	33	4	10.8		
Marlborough	425	5	5	11	11.8	3	1				1	1	1		1	1				1	1		1	3	4	4			9.0	
New Britain	27,500	384	357	2	743	27.0	258	350	64	48	22	112	124	20	274	30	44	18		274	30	44	184	186	370	251	115	4	13.4	
Newington	1,000	10	5	15	15.0	8	3	2	1	1	1	3	2		3	2				3	2		11	11	22	20	2	2	22.0	
Plainville	2,000	27	17	44	22.0	27	9	5	3	3		10	2	1	14	4	4	1		14	4	4	20	14	34	30	3	1	17.0	
Rocky Hill	1,100	6	8	14	12.7	10	1	1	2	2		2	2		2	2				2	2		11	13	24	20	3	1	21.8	
Simsbury	2,000	26	16	42	21.0	27	9	3	2	2	1	16	2	2	20	5	5	2		20	5	5	26	19	45	35	9	1	22.5	
Southington	6,000	59	79	139	23.6	73	38	14	8	3	3	23	6	4	35	7	3	2		35	7	3	67	51	118	83	33	2	19.6	
South Windsor	1,700	25	20	45	26.4	30	11	2			1	1	5		6	1				6	1		19	12	31	22	7	2	18.2	
Suffield	3,300	33	33	66	20.0	40	15	5	5	1	1	16	2	1	19	6	2			19	6	2	38	25	63	50	10	3	19.1	
West Hartford	2,900	28	38	67	23.1	34	15	7	5	6	2	22	7	3	22	7	6	2		22	7	6	19	29	48	29	17	2	16.6	
Wethersfield	2,450	23	18	41	16.7	27	5	4	3	2	1	9	1	1	14	6	1	3		14	6	1	20	17	*37	26	6	5	12.2	
Windsor	3,500	42	31	73	20.8	42	14	3	11	2	1	17	2	1	22	5	2			22	5	2	22	32	54	41	11	2	15.4	
Windsor Locks	3,000	50	38	1	89	29.7	30	45	7	6	1	21	14	2	39	12	12	2		39	12	12	25	25	50	33	16	1	16.7	
Total	189,260	2205	2154	24	4383	23.1	1730	1792	341	329	147	44	126		1600	257	258	1618	1598	1	3217	2296	847	74	1618	3217	2296	847	74	16.9

* Deaths of non-residents in public institutions: Hartford, 71; Wethersfield, 7; deducted from total in estimating death-rate.

TABLE II.—NEW HAVEN COUNTY.

TOWNS.	BIRTHS.				MARRIAGES.										DEATHS.														
	Estimated Population.	SEX.		Birth-rate per 1,000.	PARENTAGE.			NATIVITY.				SEX.		NATIVITY.															
		Male.	Female.		Not stated.	Total.	Both American.	Both Foreign.	Husb. American.	Wife American.	Husb. Foreign.	Wife Foreign.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Total.	American.	Foreign.	Not stated.	Death-rate per 1,000.						
New Haven	116,500	1531	1360	6 2897	24.9	1032	1354	205	190	112	4	475	337	73	96	981	133	83	876	845	79	7	14	10	2	2	17.5	14.5	
Ansonia	12,940	171	179	2 352	27.4	104	177	35	20	13	3	37	49	18	13	117	23	13	99	79	7	7	14	10	2	2	17.5	13.8	
Beacon Falls	800	6	9	12 15.0	4	7	1	1	1	1	1	3	1	1	1	4	3	1	3	7	7	7	14	10	2	2	17.5	13.8	
Bethany	500	9	9	9 18.0	6	3	1	1	1	1	1	2	1	1	1	2	1	1	3	6	6	6	14	10	2	2	17.5	13.8	
Branford	5,000	94	84	178 35.6	46	97	15	6	12	2	2	2	9	8	2	4	23	5	1	53	46	7	7	14	10	2	2	17.5	13.8
Cheshire	1,900	7	15	22 11.6	14	6	2	1	1	1	1	6	3	1	1	10	3	2	16	13	2	2	14	10	2	2	17.5	13.8	
Derby	8,500	91	85	179 21.0	60	74	14	17	10	4	4	45	18	12	6	81	22	5	77	79	7	7	14	10	2	2	17.5	13.8	
East Haven	1,400	15	10	25 17.9	18	4	1	1	1	1	1	6	1	1	1	7	2	1	8	8	8	8	16	14	2	2	17.5	13.8	
Gulford	2,875	30	19	50 17.4	28	11	1	3	7	1	1	18	1	1	2	22	4	4	19	22	4	4	16	14	2	2	17.5	13.8	
Hamden	4,000	51	35	86 21.5	42	20	7	8	8	1	1	14	6	1	1	22	5	2	35	39	7	7	14	10	2	2	17.5	13.8	
Madison	1,500	13	6	19 12.7	14	4	1	1	1	1	1	9	1	1	1	10	4	3	16	16	16	16	26	23	3	3	17.3	17.3	
Meriden	28,500	343	348	2 693	24.3	220	307	70	56	38	2	104	63	25	18	210	41	32	201	177	177	177	378	242	131	6	12.8	12.8	
Middlebury	600	5	4	9 15.0	8	1	1	1	1	1	1	2	2	1	1	3	1	1	4	4	4	4	8	5	1	1	13.3	13.3	
Milford	3,800	36	26	1 63	16.6	40	15	4	1	3	1	22	3	4	1	29	4	13	28	36	36	36	65	53	10	2	17.1	17.1	
Naugatuck	10,000	179	156	1 336	33.6	91	173	25	24	18	5	35	27	10	10	82	12	7	95	75	75	75	170	122	43	5	17.0	17.0	
North Branford	800	10	4	14 17.5	10	2	1	1	1	1	1	3	1	1	1	3	1	1	12	9	9	9	21	19	2	2	26.2	26.2	
North Haven	1,900	12	33	1 46	24.2	20	21	1	3	1	1	11	1	1	1	12	2	1	13	21	21	21	34	29	4	1	17.9	17.9	
Orange	6,500	61	63	1 135	19.2	59	28	19	11	8	1	24	9	1	6	40	6	3	42	47	47	47	90	75	14	1	13.8	13.8	
Oxford	1,000	4	8	12 12.0	7	1	2	1	1	1	1	4	1	1	1	6	1	2	10	7	7	7	17	14	3	3	17.0	17.0	
Prospect	500	4	4	8 16.0	4	2	1	1	1	1	1	1	1	1	1	1	1	1	4	4	4	4	8	7	1	1	18.0	18.0	
Seymour	3,300	38	42	8 24.2	33	24	8	4	7	4	2	20	6	3	3	32	8	8	28	30	30	30	58	42	16	1	17.6	17.6	
Southbury	1,100	9	12	1 22	20.0	21	1	1	1	1	1	3	1	1	1	4	1	8	24	14	14	14	20	16	3	1	18.2	18.2	
Wallingford	9,000	140	112	252 28.0	92	91	32	23	7	7	28	7	5	6	6	46	6	5	65	62	62	62	127	88	37	2	14.1	14.1	
Waterbury	50,000	750	723	4 1477	29.5	463	698	134	130	35	7	185	180	38	32	435	52	33	408	377	377	377	785	540	237	8	16.6	16.6	
Wolcott	535	6	3	8 14.9	6	2	1	1	1	1	1	1	1	1	1	1	1	1	3	1	1	1	2	2	2	2	3.7	3.7	
Woodbridge	925	4	6	10 10.7	5	3	1	1	1	1	1	1	1	1	1	1	1	1	3	4	4	4	7	7	7	7	7.5	7.5	
Total	274,375	3611	3452	21 6984	25.4	2467	3115	579	501	279	43	1067	720	194	202	2183	741	221	2131	2020	2020	2020	4153	2867	1213	73	16.1	16.1	

* Deaths of non-residents in public institutions: Meriden, 12; New Haven, 36; Waterbury, 6; deducted from total in estimating death-rate.

TABLE II.—NEW LONDON COUNTY.

TOWNS.	BIRTHS.				MARRIAGES.								DEATHS.															
	Estimated Population.	SEX.		Birth-rate per 1,000.	PARENTAGE.				NATIVITY.				SEX.		NATIVITY.		Death-rate per 1,000.											
		Male.	Female.		Both American.	Both Foreign.	Amer. Mother. For. Father.	Amer. Father. For. Mother.	Both Foreign of diff. Nations.	Not stated.	Both American.	Both Foreign.	Husb. American.	Wife Foreign.	Husb. Foreign.	Wife American.		Not stated.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Total.	American.	Foreign.	Not stated.
New London	17,500	203	189	2	394	22.5	207	115	23	35	12	2	110	42	15	14	181	25	29	318	243	67	8	18.2				
Bozrah	950	7	3	10	10.5	5	3	1	1	1	1	1	2	1	2	1	4	2	4	10	7	3	3	10.5				
Colchester	2,500	10	15	25	10.0	14	7	4	2	2	1	1	13	2	1	1	16	2	7	16	11	5	5	6.4				
East Lyme	2,200	14	17	31	14.1	16	9	2	2	2	2	1	8	1	1	1	9	2	1	26	18	3	5	11.8				
Franklin	580	5	4	9	15.5	8	1	1	1	1	1	1	2	2	2	2	3	1	2	10	8	2	2	17.2				
Griswold	4,200	71	56	127	30.2	37	44	20	19	6	1	1	18	10	1	3	32	6	4	30	19	49	37	12	11.7			
Groton	7,000	57	49	110	15.7	68	23	6	7	3	3	3	29	5	1	4	34	6	10	52	43	95	86	5	13.6			
Lebanon	1,650	17	14	31	18.7	24	3	2	2	2	2	2	5	2	2	2	5	2	2	12	14	26	26	2	15.8			
Ledyard	1,050	12	7	21	20.0	15	1	2	1	2	1	2	4	1	1	1	5	2	2	8	7	15	12	2	14.3			
Lisbon	635	12	3	15	23.6	4	6	1	4	1	1	1	1	1	1	1	1	1	1	7	4	11	8	3	17.3			
Lyme	940	12	8	20	21.3	16	1	1	2	2	2	2	2	2	2	2	2	2	1	9	5	14	13	1	14.9			
Montville	3,000	23	33	56	18.7	23	19	7	3	1	3	10	6	2	6	24	9	1	1	14	15	29	23	5	1	9.7		
Norwich	25,500	258	277	535	21.0	190	241	52	30	22	15	15	186	36	27	173	200	37	9	1	373	250	122	1	14.3			
No. Stonington	1,500	13	9	22	14.6	20	2	1	1	1	1	1	3	1	1	3	3	1	1	3	8	11	8	1	7.3			
Old Lyme	1,330	18	15	33	24.8	22	2	1	6	1	1	1	6	1	1	7	2	1	9	12	21	19	2	2	15.0			
Preston	2,550	14	21	35	13.7	18	8	2	2	3	2	1	10	2	1	11	3	4	18	21	39	34	3	2	15.2			
Salem	481	9	4	13	27.0	10	1	1	1	1	1	1	2	2	2	4	4	4	2	1	3	2	2	1	6.2			
Sprague	1,200	13	16	1	30	25.0	12	10	6	2	2	1	6	4	1	10	9	4	1	10	9	19	10	9	2	15.8		
Stonington	8,000	84	81	2	167	20.9	74	51	17	18	5	2	53	7	2	4	66	11	12	68	50	118	91	22	5	14.7		
Voluntown	1,000	7	12	19	19.0	13	3	1	2	1	1	1	7	2	1	8	2	4	5	9	14	11	2	1	14.0			
Waterford	3,175	42	25	67	21.1	25	31	4	5	2	2	1	13	2	1	16	2	2	26	27	53	47	5	1	16.7			
Total	86,951	901	858	11,770	20.3	821	575	155	144	59	16,407	114	49	52	622	118	112	633	637	1270	964	273	33	14.6				

* Deaths of non-residents in public institutions: Norwich, 9; deducted from total in estimating death-rate.

TABLE II.—FAIRFIELD COUNTY.

TOWNS.	BIRTHS.				MARRIAGES.						DEATHS.															
	Estimated Population.	SEX.		Birth-rate per 1,000.	PARENTAGE.		NATIVITY.			Husband non-resident.	Both non-resident.	SEX.		NATIVITY.												
		Male.	Female.		Total.	Both American.	Both Foreign.	Amer. Mother, For. Father.	Amer. Father, For. Mother.			Both Foreign of diff. Nations.	Not stated.		Total.											
Danbury	19,368	189	162	2 353	18.2	150	117	43	23	18	2	75	25	7	9	116	22	6	163	140	—	*303	218	78	7	15.3
Bridgeport	66,757	1,026	906	9 941	29.1	600	939	145	139	86	32	288	276	50	47	681	72	66	579	496	1	*1076	726	324	26	15.9
Bethel	3,610	35	33	68	18.9	41	10	8	1	—	14	1	—	—	3	18	7	2	25	18	—	43	36	6	1	11.9
Brookfield	950	6	10	16	16.8	8	7	—	—	—	2	—	—	—	—	2	—	—	11	14	—	25	20	5	—	26.3
Darien	2,420	20	18	38	15.7	18	11	4	1	—	8	1	—	—	—	10	7	2	59	16	—	*75	53	18	4	18.1
Easton	1,000	4	6	10	10.0	8	—	—	—	—	—	—	—	—	—	—	—	—	8	10	—	18	15	3	—	18.0
Fairfield	3,900	45	43	88	22.6	48	22	3	12	3	13	4	3	2	—	22	9	—	26	42	—	68	53	14	1	17.4
Greenwich	13,000	89	101	191	14.7	85	49	8	26	19	4	37	11	2	4	54	14	15	90	84	—	174	130	37	7	13.3
Huntington	6,000	68	62	130	21.7	60	36	14	14	6	—	28	3	1	—	32	13	1	33	48	—	81	59	19	3	13.5
Monroe	950	6	7	13	13.7	9	1	—	2	1	—	5	—	—	—	5	1	3	7	9	—	16	15	1	—	16.8
New Canaan	3,000	22	13	35	11.7	22	4	3	4	—	2	5	1	1	—	7	1	1	24	13	—	37	30	4	3	12.3
New Fairfield	650	1	6	7	10.8	6	1	—	—	—	—	3	—	—	—	3	2	—	4	7	—	11	10	1	—	16.9
Newtown	3,350	26	29	55	16.4	32	13	2	5	1	2	11	5	—	—	17	4	2	38	28	—	66	48	17	1	19.7
Norwalk	23,000	163	186	349	15.2	181	99	29	29	9	2	88	24	11	7	125	12	19	152	138	—	*290	226	59	5	12.6
Redding	1,500	13	16	30	20.0	17	11	1	1	—	4	1	1	—	—	6	—	—	1	9	—	20	17	3	—	13.3
Ridgefield	2,500	34	22	56	22.4	35	10	4	6	1	—	6	1	—	—	7	3	2	27	16	—	43	38	3	2	17.6
Sherman	650	4	7	11	16.9	4	2	3	2	—	1	—	—	—	—	1	—	—	6	7	—	13	9	3	1	20.0
Stamford	19,000	291	243	544	28.6	168	181	35	37	16	107	83	43	13	12	151	28	23	173	142	—	*315	220	88	7	17.5
Stratford	3,300	44	27	71	21.5	47	14	3	5	1	11	3	1	1	—	16	7	6	37	40	—	77	59	15	3	23.3
Trumbull	1,500	6	10	16	10.7	6	5	1	2	2	2	2	1	1	—	4	1	—	14	15	—	29	21	7	1	19.3
Weston	800	7	5	12	15.0	7	3	2	—	—	3	—	—	—	—	3	1	1	8	5	—	13	12	1	—	16.3
Westport	3,500	38	43	81	23.1	41	25	4	7	3	1	12	2	2	—	18	6	4	32	34	—	66	46	19	1	18.8
Wilton	1,700	18	11	29	17.1	17	5	2	2	3	—	2	—	—	—	1	8	2	23	10	—	33	30	2	1	19.4
Total	182,395	2,155	966	23,414	22.7	1,610	1,565	315	327	173	154	697	402	93	89	1,282	212	153	1,548	1,348	1	2,892	2,091	727	74	15.8

* Deaths of non-residents in public institutions: Bridgeport, 14; Danbury, 6; Darien, 30; Norwalk, 1; Stamford, 2; deducted from total in estimating death-rate.

TABLE II.—WINDHAM COUNTY.

TOWNS.	Estimated Population.	BIRTHS.					MARRIAGES.										DEATHS.														
		SEX.		Birth-rate per 1,000.	PARENTAGE.					NATIVITY.					SEX.		NATIVITY.														
		Male.	Female.		Total.	Both American.	Both Foreign.	Amer. Mother.	For. Father.	Amer. Father.	For. Mother.	Both Foreign of diff. Nations.	Not stated.	Both American.	Both Foreign.	Wife American.	Husb. Foreign.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Total.	American.	Foreign.	Not stated.	Death-rate per 1,000.			
Brooklyn.....	2,428	28	26	55	22.7	16	30	2	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16.5	
Ashford.....	675	13	3	16	23.7	14	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	28.1	
Canterbury.....	800	5	6	11	13.8	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	33.8	
Chapin.....	580	3	5	8	14.5	6	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16.4	
Eastford.....	600	7	3	10	16.7	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	18.3	
Hampton.....	650	7	10	17	26.1	15	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15.4	
Killingly.....	7,000	64	63	127	18.1	53	44	14	15	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15.1	
Pianfield.....	6,000	61	44	106	21.2	36	40	12	15	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	18.8	
Pomfret.....	1,500	21	26	47	31.3	20	16	2	6	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	14.0	
Putnam.....	6,800	57	67	125	18.4	48	31	16	23	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16.7	
Scotland.....	475	1	2	3	6.3	2	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	23.4	
Sterling.....	1,050	12	18	30	28.5	22	4	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	26.7	
Thompson.....	5,620	86	75	161	28.6	20	113	13	6	4	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16.7	
Windham.....	10,000	111	111	222	22.2	100	68	18	28	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17.5	
Woodstock.....	2,300	20	22	42	18.3	27	8	4	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16.1	
Total.....	45,448	496	481	980	21.5	399	357	85	105	17	17	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17.5

TABLE II.—LITCHFIELD COUNTY.

TOWNS.	Estimated Population.	BIRTHS.			MARRIAGES.						DEATHS.										
		SEX.		Birth-rate per 1,000.	PARENTAGE.			NATIVITY.													
		Male.	Female.		Not stated.	Total.	Both American.			Husband non-resident.			Both non-resident.	SEX.		Total.	American.	Foreign.	Not stated.	Death-rate per 1,000.	
							Male.	Female.	Not stated.	Both American.	Both Foreign.	Husb American.		Wife Foreign.	Husb. Foreign.						Wife American.	Not stated.	Male.	Female.	Not stated.
Litchfield.....	3,500	31	27	58	16.6	40	8	4	4	2	15	---	3	1	19	5	5	29	1	16.6	
Barkhamsted.....	1,050	8	10	18	17.1	13	2	1	1	---	1	---	---	---	1	1	1	8	5	12.4	
Bethlehem.....	580	4	8	12	20.7	10	1	1	---	---	2	---	1	---	3	2	---	3	3	10.3	
Bridgewater.....	650	10	10	20	30.8	13	4	1	2	---	---	---	---	---	---	---	---	7	3	15.4	
Canaan.....	800	7	8	15	18.8	10	3	1	1	---	2	---	1	2	5	2	2	18	7	31.3	
Colebrook.....	850	5	4	9	10.6	3	1	2	1	1	4	---	---	---	4	2	---	5	6	16.5	
Cornwall.....	1,200	17	9	26	21.7	20	3	1	1	1	2	---	---	---	2	---	---	5	7	10.0	
Goshen.....	920	10	7	17	18.5	13	3	---	---	---	3	---	1	4	4	1	---	4	8	13.0	
Harwinton.....	1,200	20	7	27	21.7	10	15	2	---	---	5	1	1	---	7	4	1	16	14	25.0	
Kent.....	1,200	10	9	19	15.8	17	---	1	1	---	5	---	---	---	5	2	2	14	17	25.8	
Morris.....	600	3	6	9	15.0	6	3	---	---	---	7	---	---	---	7	2	1	2	4	10.0	
New Hartford.....	3,200	54	33	89	27.8	19	59	2	7	2	12	25	1	2	40	13	4	36	26	19.4	
New Milford.....	4,035	54	46	100	24.8	52	30	12	5	1	19	4	2	---	25	6	4	38	31	17.1	
Norfolk.....	1,425	12	22	34	23.9	25	2	3	4	---	4	---	---	---	5	2	1	15	11	18.2	
North Canaan.....	1,600	18	17	35	21.9	22	10	1	1	---	14	1	1	---	16	4	9	15	13	17.5	
Plymouth.....	2,300	36	44	80	34.8	27	40	4	4	3	7	3	1	1	12	2	1	19	31	21.7	
Roxbury.....	850	9	7	16	18.8	10	3	1	2	---	3	---	1	---	4	2	1	9	2	12.9	
Salisbury.....	3,500	32	22	54	15.4	33	9	5	4	1	12	2	1	1	16	3	7	27	28	15.7	
Sharon.....	2,300	16	18	34	14.8	23	3	4	2	1	6	---	1	1	8	4	1	9	18	11.7	
Thomaston.....	3,500	27	29	56	16.0	22	28	3	1	2	18	10	3	7	38	8	10	22	17	11.1	
Torrington.....	12,054	177	151	328	27.3	112	162	24	20	6	31	42	8	6	88	6	6	73	77	12.4	
Warren.....	450	3	3	6	13.3	4	1	---	---	---	1	---	---	---	1	---	---	2	3	5	11.1
Washington.....	2,000	16	21	37	18.5	17	13	1	4	2	3	1	---	---	4	1	1	18	16	17.0	
Watertown.....	3,100	30	33	63	20.3	34	11	6	10	2	21	11	3	2	37	10	6	20	20	12.9	
Winchester.....	8,000	72	74	148	18.5	102	19	13	14	---	41	9	5	3	58	13	9	50	56	13.3	
Woodbury.....	1,900	15	20	35	18.4	24	6	4	1	---	7	---	---	---	7	5	---	9	12	11.1	
Total.....	62,764	696	645	4,134	21.4	681	439	97	92	24	246	109	31	30	1	417	100	72	476	14.9	

TABLE II.—MIDDLESEX COUNTY.

TOWNS.	Estimated Population.	BIRTHS.				MARRIAGES.								DEATHS.											
		SEX.		Birth-rate per 1,000.	PARENTAGE.				NATIVITY.				SEX.		NATIVITY.										
		Male.	Female.		Total.	Both American.	Both Foreign.	Amer. Mother.	For. Father.	Amer. Rather.	Both Foreign of diff. Nations.	Not stated.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Total.	American.	Foreign.	Not stated.	Death-rate per 1,000.		
Middletown	20,000	185	166	342	17.1	152	102	29	43	15	1	45	18	11	13	87	17	8	184	164	*348	228	116	4	11.1
Haddam	1,900	19	17	36	18.9	10	21	1	1	4	1	5	3	1	1	10	1	2	16	16	32	30	32	2	16.8
Chatham	2,300	25	7	32	13.9	22	6	1	2	1	1	10	1	1	1	11	2	3	16	11	27	17	9	1	11.7
Chester	1,300	16	6	22	16.9	10	9	3	1	1	1	4	1	1	2	8	1	3	14	8	22	15	7	1	17.0
Clinton	1,400	7	7	14	10.0	11	1	2	2	2	2	9	1	1	1	10	5	2	16	14	30	27	2	1	21.4
Cromwell	2,000	32	19	51	25.5	19	17	6	6	4	4	3	5	1	1	10	1	3	12	10	22	14	7	1	11.0
Durham	850	10	3	13	15.3	8	3	2	2	1	1	4	1	1	1	4	1	2	9	2	11	11	11	1	12.9
East Haddam	2,600	21	17	38	14.6	25	9	2	1	1	1	11	1	1	1	11	5	1	29	24	53	45	6	2	20.4
Essex	2,300	20	21	41	17.8	32	2	3	1	3	1	8	1	1	1	10	2	1	18	15	33	30	3	1	14.3
Killingworth	700	6	4	10	14.3	5	5	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	2	1	4.3
Middlefield	1,000	8	11	19	19.0	14	4	1	1	2	2	3	3	3	3	3	3	3	8	12	20	16	5	2	20.0
Old Saybrook	1,500	12	15	27	18.0	20	2	1	2	2	2	6	1	1	1	8	1	3	8	9	17	11	6	1	11.3
Portland	4,700	49	37	86	18.3	27	47	7	3	2	2	12	15	2	2	29	10	2	27	37	64	37	26	1	13.6
Saybrook	1,500	16	12	29	19.3	17	7	2	2	3	3	12	4	2	1	6	1	1	14	17	31	27	3	1	20.7
Westbrook	850	7	8	15	17.6	13	2	1	1	1	1	1	1	1	1	1	1	1	14	8	22	21	1	1	26.9
Total	44,900	433	340	775	17.2	385	237	54	63	35	1	126	47	16	20	209	50	28	386	349	735	530	191	14	16.5

* Deaths of non-residents in public Institutions: Middletown, 126; deducted from total in estimating death-rate.

TABLE II.—TOLLAND COUNTY.

TOWNS.	BIRTHS.					MARRIAGES.										DEATHS.								
	Estimated Population.	SEX.		PARENTAGE.						NATIVITY.						SEX.			NATIVITY.		Death-rate per 1,000.			
		Male.	Female.	Total.	Birth-rate per 1,000.	Both American.	Both Foreign.	Husb. American.	Wife Foreign.	Husb. Foreign.	Wife American.	Not stated.	Total.	Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	Total.	American.		Foreign.	Not stated.	
Tolland	1,120	7	7	14	12.5	8	4	4	---	---	---	2	---	8	3	3	4	9	---	13	11	2	---	11.6
Andover	406	4	5	9	22.2	5	2	2	---	---	---	---	---	3	1	---	2	5	---	7	7	---	---	17.2
Bolton	500	6	4	10	20.0	8	1	1	---	---	---	---	---	1	---	---	2	---	---	2	2	---	---	4.0
Columbia	730	5	5	10	13.7	6	---	---	1	---	3	---	---	2	---	---	5	4	---	9	8	1	---	12.3
Coventry	1,750	9	11	20	11.5	10	3	3	3	4	---	---	---	15	---	---	16	14	---	2	5	3	---	17.1
Ellington	1,700	14	21	35	20.6	18	10	3	2	1	1	---	---	7	3	2	15	10	---	25	17	7	1	14.7
Hebron	1,000	17	13	30	30.0	19	6	3	2	---	---	---	---	7	4	1	12	14	---	26	24	2	---	26.0
Mansfield	1,911	12	14	26	13.6	21	3	1	1	---	---	---	---	11	5	---	15	17	---	32	24	6	2	16.7
Somers	1,500	13	19	32	21.3	14	11	5	1	---	---	---	---	9	2	---	19	10	---	29	20	8	1	19.3
Stafford	4,615	51	44	96	20.8	41	26	13	9	4	3	---	---	40	11	2	29	29	---	58	51	7	---	12.6
Union	425	3	5	8	18.8	7	1	---	---	---	---	---	---	5	1	1	5	4	---	9	9	---	---	21.2
Vernon	9,500	95	74	170	17.9	39	69	26	20	11	5	---	---	58	9	5	48	77	---	125	73	50	2	13.2
Willington	909	6	8	14	15.4	10	3	1	---	---	---	---	---	4	---	---	11	2	---	13	13	---	---	14.3
Total	26,066	242	230	2,474	18.1	206	139	52	51	17	9	113	24	10	24	---	183	195	---	378	284	86	8	14.5

TABLE III.—RECAPITULATION BY COUNTIES.

COUNTIES.	Estimated Population.	BIRTHS.										MARRIAGES.										DEATHS.						
		SEX.			Birth-rate per 1,000.	PARENTAGE				NATIVITY.						SEX.			NATIVITY.		Death-rate per 1,000.							
		Male.	Female.	Total.		Both American.	Both Foreign.	Amer. Mother.	For. Father.	Amer. Father.	Both Foreign of diff. Nations.	Not stated.	Both American.	Both Foreign.	Husb. American.	Wife Foreign.	Husb. Foreign.	Wife American.	Not stated.	Total.		Husband non-resident.	Both non-resident.	Male.	Female.	Not stated.	American.	Foreign.
Hartford . . .	189,260	2205	2154	4383	23.1	1730	1792	341	329	147	44	855	489	130	126	1600	257	258	1618	1698	1	3217	2296	847	74	16.9		
New Haven . .	274,375	3611	3352	6984	25.4	2467	3115	679	501	279	43	1067	720	194	202	2183	341	221	2131	2020	2	4153	2867	1213	73	16.1		
New London . .	86,951	901	858	1770	20.3	821	575	155	144	59	16	407	114	49	52	622	118	112	633	637	--	1270	964	273	33	14.5		
Fairfield . . .	182,395	2155	1966	4144	22.7	1610	1565	315	327	173	154	697	402	93	89	11282	212	153	1548	1343	1	2892	2091	727	74	15.8		
Windham . . .	45,448	496	481	980	21.5	399	357	85	105	17	17	204	72	31	51	1	359	69	68	382	414	--	796	598	177	21	17.5	
Litchfield . . .	62,764	696	645	1345	21.4	681	439	97	92	24	12	246	109	31	30	1	417	100	72	476	464	--	940	758	164	18	14.9	
Middlesex . . .	44,900	433	340	775	17.2	385	237	54	63	35	1	126	47	16	20	--	209	50	28	386	349	--	735	530	191	14	16.4	
Tolland	26,066	242	230	474	18.1	206	139	52	51	17	9	113	24	10	24	--	171	42	21	183	195	--	378	284	86	8	14.5	
Total	912,159	10739	10026	20855	22.6	8299	8219	1678	1612	751	296	3715	1977	554	594	3	6843	1189	933	7357	7020	4	14381	10388	3678	315	15.7	

TABLE IV.

EXHIBITING THE NUMBER OF BIRTHS BY SEXES IN THE COUNTIES FOR
EACH MONTH IN THE YEAR ENDING DECEMBER 31st, 1899.

COUNTIES.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mo. not sta.	Total.
Hartford ----	Males.....	173	172	191	168	161	184	188	198	212	166	190	201	1	2,205
	Females.....	181	140	213	163	161	161	205	212	176	194	186	162	..	2,154
	Not stated..	2	1	3	1	3	1	3	2	3	2	1	2	..	34
New Haven ..		356	313	407	332	325	346	396	412	391	362	377	365	1	4,383
	Males.....	342	285	305	243	282	267	328	318	327	314	282	318	..	3,611
	Females.....	278	271	287	233	250	268	305	290	282	290	292	306	..	3,352
New London..	Not stated..	1	1	2	..	2	1	4	3	2	2	3	..	..	21
		621	557	594	476	534	536	637	611	611	606	577	624	..	6,984
	Males.....	81	62	81	78	74	63	87	70	88	68	67	82	..	901
Fairfield ----	Females.....	86	57	61	61	72	78	81	80	71	77	61	73	..	853
	Not stated..	1	..	1	..	1	2	..	..	3	2	..	1	..	11
		168	119	143	139	147	143	168	150	162	147	128	156	..	1,770
Windham ----	Males.....	169	150	191	161	160	166	201	213	203	207	165	169	..	2,155
	Females.....	176	161	186	154	139	135	195	181	172	159	160	148	..	1,966
	Not stated..	2	2	..	..	2	4	5	1	1	4	..	1	1	23
Litchfield ---		347	313	377	315	301	305	401	395	376	370	325	318	1	4,144
	Males.....	49	39	26	41	56	35	42	48	35	47	33	45	..	496
	Females.....	51	37	39	47	45	35	44	42	29	42	34	36	..	481
Middlesex --	Not stated..	..	..	..	1	..	..	..	..	1	..	1	..	..	3
		100	76	65	89	101	70	86	90	65	89	68	81	..	980
	Males.....	63	59	53	57	50	53	53	50	56	62	69	71	..	696
Tolland ----	Females.....	48	48	56	67	47	49	55	55	55	56	55	54	..	645
	Not stated..	..	..	1	..	..	2	1	..	..	..	..	..	..	4
		111	107	110	124	97	104	109	105	111	118	124	125	..	1,345
Grand Total ..	Males.....	30	21	30	40	30	44	37	45	37	34	40	45	..	433
	Females.....	29	23	24	27	28	34	33	31	18	33	22	38	..	340
	Not stated..	..	..	1	..	..	1	..	..	..	..	..	..	..	2
Totals -----		59	44	55	67	58	79	70	76	55	67	62	83	..	775
	Males.....	25	17	22	18	12	18	24	29	23	22	12	20	..	242
	Females.....	22	25	25	21	19	21	18	18	16	16	12	17	..	230
Grand Total ..	Not stated..	..	1	..	..	..	..	..	..	..	..	..	1	..	2
		47	43	47	39	31	39	42	47	39	38	24	38	..	474
	Males.....	932	805	899	806	825	830	960	971	981	920	858	951	1	10,739
Grand Total ..	Females.....	871	762	891	773	761	781	936	909	819	867	822	834	..	10,026
	Not stated..	6	5	8	2	8	11	13	6	10	10	5	5	1	90
	Grand Total ..	1809	1572	1798	1581	1594	1622	1909	1886	1810	1797	1685	1790	2	20,855

TABLE V.

EXHIBITING THE NUMBER OF DEATHS BY SEXES IN THE COUNTIES FOR
EACH MONTH IN THE YEAR ENDING DECEMBER 31st, 1899.

COUNTIES.	Sex.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mo. not sta.	Total.
Hartford	Males.....	184	134	141	107	96	136	189	152	128	111	95	145	..	1,618
	Females....	189	124	128	129	118	103	162	159	120	116	121	128	1	1,598
	Not stated..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
New Haven		373	258	269	237	214	239	351	311	248	227	216	273	1	3,217
	Males.....	219	154	182	197	155	139	223	208	162	153	159	178	2	2,131
	Females....	233	173	165	149	135	144	202	174	167	171	161	146	..	2,020
New London	Not stated..	..	..	..	..	..	1	..	..	..	1	..	..	..	2
		462	327	347	346	290	284	425	382	329	325	320	324	2	4,153
	Males.....	67	56	59	52	52	43	50	57	59	51	42	43	2	633
Fairfield	Females....	70	39	60	42	48	48	63	66	55	50	33	62	1	637
	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		137	95	119	94	100	91	113	123	114	101	75	105	3	1,270
Windham	Males.....	153	122	145	113	119	136	147	167	117	106	96	127	..	1,548
	Females....	142	121	102	122	95	110	119	134	110	103	79	105	1	1,343
	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Litchfield		295	243	247	235	214	246	266	301	227	209	175	232	2	2,892
	Males.....	50	31	34	38	34	22	28	31	25	27	28	34	..	382
	Females....	55	46	33	34	33	23	28	36	34	22	31	39	..	414
Middlesex	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		105	77	67	72	67	45	56	67	59	49	59	73	..	796
	Males.....	49	33	44	44	32	33	36	48	42	36	31	48	..	476
Tolland	Females....	58	42	38	44	32	47	33	48	37	17	35	33	..	464
	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		107	75	82	88	64	80	69	96	79	53	66	81	..	940
Totals	Males.....	30	43	31	38	30	28	34	36	29	25	25	37	..	386
	Females....	30	40	27	27	19	21	33	44	34	22	27	25	..	349
	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Grand Total		60	83	58	65	49	49	67	80	63	47	52	62	..	735
	Males.....	20	21	21	18	15	10	13	9	14	15	13	13	1	183
	Females....	28	18	19	20	18	9	14	18	12	14	14	11	..	195
Totals	Not stated..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		48	39	40	38	33	19	27	27	26	29	27	24	1	378
	Males.....	772	594	657	607	533	547	720	708	576	524	489	625	5	7,357
Grand Total	Females....	805	603	572	567	498	505	654	679	569	515	501	549	3	7,020
	Not stated..	..	..	..	1	..	1	..	..	..	1	..	..	1	4
		1577	1197	1229	1175	1031	1053	1374	1387	1145	1040	990	1174	9	14,381

TABLE VI.
NOSOLOGICAL ARRANGEMENT BY TOWNS—HARTFORD COUNTY.

CAUSES OF DEATH.		STATE.	Hartford.	Avon.	Berlin.	Bloomfield.	Bristol.	Burlington.	Canton.	East Granby.	East Hartford.	East Windsor.	Rutland.	Farmington.	Glastonbury.	Granby.	Hartland.	Manchester.	Marlborough.	New Britain.	Newington.	Plainville.	Rocky Hill.	Simsbury.	South Windsor.	Sturfield.	West Hartford.	Wethersfield.	Windsor.	Windsor Locks.	TOTAL.
Class I.—Zymotic Diseases.																															
ORDER 1. MIASMATIC.																															
Measles	46	15	—	1	1	—	—	—	—	3	—	—	—	—	2	—	—	—	—	1	—	—	—	—	—	1	—	—	—	2	26
Scarlet Fever	60	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	6
Influenza	660	36	4	1	15	1	1	—	2	3	1	4	—	4	—	—	2	—	22	2	2	2	1	10	6	8	1	2	7	146	
Typhoid Fever	186	32	—	—	2	—	—	—	6	1	1	2	1	1	—	—	2	—	2	—	—	1	1	3	1	—	—	2	—	57	
Cerebro-Spinal Fever	90	13	1	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	4	1	—	—	—	2	—	—	—	—	—	1	26
Continued Fever	23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	139	26	—	—	3	—	—	—	2	—	—	—	—	1	—	—	—	—	13	1	1	—	1	6	1	1	—	—	—	—	41
Diphtheria	173	53	—	—	—	—	—	—	—	—	—	—	—	2	—	—	3	—	13	1	1	—	—	—	4	3	1	—	—	2	84
Membranous Croup	64	9	—	—	—	—	1	—	—	—	—	—	—	1	—	—	3	—	1	—	—	—	—	4	—	—	—	—	—	—	19
Other Miasmatic Diseases	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

[illegible]

[illegible]

Class V.—Developmental Diseases.

[illegible]

Class VI.—Local Diseases.

ORDER 1. OF NERVOUS SYSTEM.

[illegible]

[illegible]

ORDER 4. OF RESPIRATORY SYSTEM.

[illegible]

ORDER 5 OF DIGESTIVE SYSTEM.

[illegible]

TABLE VI—CONTINUED. HARTFORD COUNTY.

CAUSES OF DEATH.	STATE.																														
	Hartford.	Avon.	Berlin.	Bloomfield.	Bristol.	Burlington.	Canton.	East Granby.	East Hartford.	East Windsor.	Enfield.	Farmington.	Glastonbury.	Granby.	Hartland.	Manchester.	Marlborough.	New Britain.	Newington.	Plainville.	Rocky Hill.	Simsbury.	Southington.	South Windsor.	Suffield.	West Hartford.	Wethersfield.	Windsor.	Windsor Locks.	TOTAL.	
Fistula.....																															
Peritonitis (not puerperal).....	82	14			2				1		2							2	1						1						23
Ascites.....	5	1																													1
Gallstones.....	7	1																													1
Cirrhosis of Liver.....	102	12			1										1			2	2												18
Hepatitis.....	28	3														1		2	2												7
Jaundice.....	8												1					1													2
Other Diseases of Liver.....	66	5							1					1				2	2						1						12
Other Diseases of Digestive System.....	73	10	2	1		1					1					1		4									1				21
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																															
Addison's Disease.....	5																					1									1
Disease of Spleen.....	2																														1
Diseases of Lymphatic System.....	6	1																													1
ORDER 7. OF URINARY SYSTEM.																															
Nephritis.....	245	26	1	1	1				1				1					2	2				1	2							37
Bright's Disease.....	487	68	1	3	1			6	6	3	3	2	2	1	3			6	2	4	2	3	2	2		2			3	2	3122

Uremia	62	8	1	1	1	1	1	1	1	1	1	10
Suppression of Urine	3	1	1	1	1	1	1	1	1	1	1	1
Calculus	8	1	1	1	1	1	1	1	1	1	1	2
Disease of Bladder	70	5	1	1	1	1	1	1	1	1	1	16
Prostatitis	22	5	1	1	1	1	1	1	1	1	1	9
Other Diseases of Urinary System	16	2	1	1	1	1	1	1	1	1	1	3

ORDER 8. OF GENERATIVE SYSTEM.

A. *Diseases of the Reproductive Organs.*

Diseases of the Uterus	20	4	1	1	1	1	1	1	1	1	1	4
Metritis	6	2	1	1	1	1	1	1	1	1	1	2
Disease of Ovaries	8	1	1	1	1	1	1	1	1	1	1	1
Disorders of Menstruation	3	1	1	1	1	1	1	1	1	1	1	1
Pelvic Abscess	3	1	1	1	1	1	1	1	1	1	1	1
Diseases of Testis, Penis, Scrotum, etc.	1	1	1	1	1	1	1	1	1	1	1	1

B. *Diseases of Parturition.*

Abortion and Miscarriage	21	1	1	1	1	1	1	1	1	1	1	1
Puerperal Mania	1	1	1	1	1	1	1	1	1	1	1	1
Puerperal Convulsions	23	3	1	1	1	1	1	1	1	1	1	5
Puerperal Hemorrhage	6	1	1	1	1	1	1	1	1	1	1	1
Placenta Previa	4	1	1	1	1	1	1	1	1	1	1	1
Other Accidents of Childbirth	108	2	3	2	1	1	1	1	1	1	1	16

ORDER 9. OF ORGANS OF LOCOMOTION.

Gout, Necrosis	5	1	1	1	1	1	1	1	1	1	1	1
Arthritis, Periostitis	1	1	1	1	1	1	1	1	1	1	1	1
Other Diseases of Organs of Locomotion	1	1	1	1	1	1	1	1	1	1	1	1

TABLE VI—CONTINUED. HARTFORD COUNTY.

CAUSES OF DEATH.		STATE.																												Hartford.	
ORDER 10. OF INTEGRUMENTARY SYSTEM.																															
Other Diseases of Integrumentary System																														21	2
Class VII.—Violence.																															
ORDER 1. ACCIDENT AND NEGLIGENCE.																															
Fractures and Contusions																														107	16
Railroad Injuries																														130	11
Gun-Shot Wounds																														24	4
Burns and Scalds																														84	7
Poisoned																														47	7
Drowning																														116	17
Suffocation																														13	1
Other Accidents																														235	25
ORDER 2. HOMICIDE.																															
Murder																														4	1

RECAPITULATION OF HARTFORD COUNTY.

CLASSIFIED DISEASES.	RECAPITULATION OF HARTFORD COUNTY.																												TOTAL.	
	State.	Hartford.	Avon.	Berlin.	Bloomfield.	Bristol.	Burlington.	Canton.	East Granby.	East Hartford.	East Windsor.	Knelt.	Farmington.	Glastonbury.	Granby.	Hartland.	Manchester.	Marlborough.	New Britain.	Newington.	Plainville.	Rocky Hill.	Stimbury.	South Windsor.	Suffield.	West Hartford.	Wethersfield.	Windsor.		Windsor Locks.
All causes	14381	1550	1147	31	131	9	32	10	106	42	103	47	61	18	11	108	4	370	22	34	24	45	118	31	63	48	37	54	50	3217
Classes.																														
I. Zymotic Diseases	2878	318	210	6	38	3	3	1	23	7	22	12	19	3	1	22	1	107	6	3	3	10	42	13	14	5	5	15	9	723
II. Parasitic Diseases	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
III. Dietetic Diseases	94	16	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
IV. Constitutional Diseases	2451	249	312	1	16	6	2	12	6	2	12	6	22	8	7	6	3	30	57	2	5	10	18	4	5	6	6	9	9	519
V. Developmental Diseases	855	117	1	2	6	4	4	3	9	2	4	2	10	3	2	10	3	10	36	1	3	5	3	5	8	2	3	2	224	
VI. Local Diseases	6755	692	522	20	57	4	14	5	53	18	41	21	23	7	6	37	3	138	10	24	14	20	43	12	33	25	16	22	24	1409
VII. Violence	850	90	1	1	10	1	4	1	11	3	6	2	6	1	1	4	1	19	1	2	1	1	8	1	9	1	7	2	1	193
VIII. Ill-defined and cause not stated	495	67	2	4	1	1	1	1	2	5	3	2	2	1	1	5	1	12	2	1	1	1	2	1	1	3	1	2	6	127
Class I.—Orders.																														
1. Miasmatic Diseases	1434	184	1	4	5	21	2	2	13	4	12	6	11	1	1	10	1	46	4	3	3	3	29	10	11	3	2	9	5	403
2. Diarrhoeal Diseases	1180	103	5	1	13	1	1	1	10	3	10	5	7	2	1	10	1	46	2	1	1	4	11	1	3	2	3	5	4	255
3. Malarial Diseases	127	13	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	7	1	1	1	1	1	1	1	1	1	1	24	
4. Zoogenous Diseases	20	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	8	
5. Venereal Diseases	117	13	1	1	3	1	1	1	1	1	1	1	1	1	1	1	1	8	1	1	1	2	1	1	1	1	1	1	33	
6. Septic Diseases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Class II.—Orders.																														
Parasitic Diseases	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	

ORDER 2. DIARRHOEAL.

Cholera Infantum.....	523	51	12	1	2	1	8	3	2	15	11	2	2	1	1	4	164
Infantile Diarrhoea.....	426	61	7	1	2	3	3	3	10	2	12	2	1	1	1	7	144
Cholera Morbus.....	25	1	1	1	1	1	1	1	2	1	1	1	1	1	1	3	8
Dysentery.....	161	14	4	1	1	5	5	1	1	7	3	5	1	5	1	2	65
Diarrhoea.....	46	6	2	1	2	2	1	1	1	1	1	1	1	1	1	1	14

ORDER 3. MALARIAL.

Intermittent Fever.....	13	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	6
Remittent Fever.....	19	4	1	1	1	1	1	1	1	1	2	1	1	1	1	1	7
Pernicious or Congestive Fever.....	15	1	1	1	1	1	1	1	1	1	2	1	1	1	1	1	4
Other Malarial Diseases.....	80	15	1	1	1	1	2	1	8	1	1	5	1	1	1	4	37

ORDER 4. ZOOGENOUS.

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ORDER 5. VENEREAL.

Syphilis.....	19	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4
Gonorrhoea, Stricture of Urethra.....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

ORDER 6. SEPTIC.

Erysipelas.....	32	6	2	1	1	1	1	1	1	1	1	1	1	1	1	3	15
Pyæmia, Septicæmia.....	49	7	1	1	1	1	1	1	1	1	1	1	1	1	1	2	12
Puerperal Fever.....	36	2	2	1	1	1	1	1	1	1	1	1	1	1	1	3	13

Class II.—Parasitic Diseases.

Thrush.....	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Parasitic Diseases.....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

TABLE VI—CONTINUED. NEW HAVEN COUNTY.

CAUSES OF DEATH.	TOWN.																											TOTAL.
	STATE.	New Haven.	Ansonia.	Beacon Falls.	Bethany.	Brandon.	Cheshire.	Derby.	East Haven.	Guilford.	Hamden.	Madison.	Meriden.	Middlebury.	Milford.	Naugatuck.	North Branford.	North Haven.	Orange.	Oxford.	Prospect.	Seymour.	Southbury.	Wallingford.	Waterbury.	Wolcott.	Woodbridge.	
Class III.—Dietetic Diseases.																												
Starvation		5				1							1										1					
Intemperance		9	1																1									
Chronic Alcoholism		66	7	1		1							4		2						1		1		2			
Delirium Tremens		8	2																									
Other Dietetic Diseases		6	3																									
Class IV.—Constitutional Diseases.																												
Rheumatism	105	21						2	1				5									1			5		35	
Gout	1																											
Rickets	6	1	1																						1		8	
Cancer of Breast	71	10	1								1			1								2			7		22	
Cancer of Stomach	100	18				1	1	2	1	1	1		2	1					3						2		32	
Cancer of Womb	90	10					1	1	1	1	1		3					1	1			1	2	3			24	
Cancer of other Organs	308	40					1	3	1	2	2	1	1					1	1	2		2		4	13		83	
Tabes Mesenterica	4	1																									1	
Tubercular Meningitis, Acute Hydroceph.	69	11				3			1	1	1		3												1		28	
Phtisis	1451	196	27			14		13	2	6	5		61		1	16	5	2	6	1		4		16	76		437	

Other forms of Tuberculosis.....	56	1	1	1	1	1	1	1	1	2	5	10
Scrofula.....	13	7										7
Pott's Disease.....	6											2
Hip-Joint Disease.....	2											1
Purpura.....	7	1										3
Anemia.....	48	4										12
Diabetes.....	112	9	3	1	3	1	1	1		3	9	30
Other Constitutional Diseases.....	2											

Class V.—Developmental Diseases.

Premature Birth.....	358	50	1	2	6	2	2	7	4	4	2	1	2	5	24	112
Atelectasis.....	24	8	1			1						1		1	2	16
Cyanosis.....	26	1								2		1				5
Spina Bifida.....	7	1	1												1	3
Imperforate Anus.....	1															
Other Congenital Malformations.....	48	6		1					1	1					5	16
Umbilical Hemorrhage.....	9	3	1									1			3	9
Old Age.....	382	40	2	2	1	4	2	1	9	1	1	1	3	1	2	88

Class VI.—Local Diseases.**ORDER 1. OF NERVOUS SYSTEM.**

Inflammation of Brain or its Membranes.....	273	34	11	2	4	7	1	1	1	3	9	1	2		18	94
Apoplexy.....	773	80	8		1	6	10	2	2	7	20	5	1	2	4	221
Softening of Brain.....	61	4		1								1				16
Hydrocephalus, not acute.....	18	2										2	1	2	1	6
Hemiplegia.....	42	6														12
Paralysis Agitans.....	2											3				

TABLE VI—CONTINUED. NEW HAVEN COUNTY.

CAUSES OF DEATH.	STATE.	TOWN.																	Total.
		New Haven.	Ansonia.	Beacon Falls.	Bethany.	Brandon.	Cheshire.	Derby.	East Haven.	Guilford.	Hamden.	Madison.	Meriden.	Middlebury.	Millford.	Naugatuck.	North Branford.	North Haven.	
Insanity.....	83	5					1				1						1		9
Chorea.....	6	1																	2
Epilepsy.....	47	6						1						1				1	13
Convulsions.....	201	35	2			3	1	4	1			1	8	2				10	70
Trismus Nascentium.....	4	2		1			1				1								6
Tetanus.....	14	2															1		4
Paraplegia.....	5	1																	3
Diseases of Spinal Cord.....	19	2		2		1			1			2						1	9
Myelitis.....	2	1																	1
Spinal Meningitis.....	28	2	2											1					7
Locomotor Ataxia.....	16	3	1																4
Other Diseases of Nervous System.....	237	13	1			1		1		1	4	13		1	1		1		52
ORDER 2. OF ORGANS OF SPECIAL SENSE.																			
Epistaxis.....	1		1																1
Otitis.....	13	1												1			1		3
ORDER 3. OF CIRCULATORY SYSTEM.																			
Endocarditis.....	109	22	1					1			1							2	36
Valvular Disease of Heart.....	411	58	7			3		8	1	2	4	2	12	3	4	1		3	126
Disease of Heart.....	508	52	2		1		2	3		7	1	9		4	4	3	1	5	114
Pericarditis.....	11	4																	6

Angina Pectoris.....	51	8	1	1	1	1	1	1	4	1	1	1	1	1	1	18
Aneurism.....	11	2														4
Senile Gangrene.....	33								2							9
Thrombosis, Embolism.....	42	4														9
Phlebitis.....	6	1														3
Other Diseases of Circulatory System.....	48	9														15

ORDER 4. OF RESPIRATORY SYSTEM.

Laryngitis.....	22															5
Catarrhal Croup.....	11															2
Emphysema, Asthma.....	37	2														14
Bronchitis.....	419	69	7													147
Pneumonia.....	1058	118	8	1	1	9	2	8	3	3	238	221	2	6	3	293
Pleurisy.....	33	7	1													14
Other Diseases of Respiratory System.....	108	9														24

ORDER 5. OF DIGESTIVE SYSTEM.

Stomatitis.....	5															1
Dentition.....	8															3
Quinsy.....	8	1														11
Dyspepsia.....	29	8														2
Hæmatemesis.....	7	1														43
Disease of Stomach.....	141	24														9
Ulcer of Stomach.....	23	3														23
Enteritis.....	91	5	2													17
Appendicitis.....	48	8														4
Ulceration of Intestines.....	5	3														3
Obstruction of Intestines.....	54	12	1													18
Intussusception of Intestines.....	11	1														3
Hernia.....	29	5	1													10

TABLE VI—CONTINUED. NEW HAVEN COUNTY.

CAUSES OF DEATH.	LOCALITIES.																										Total.		
	STATE.	New Haven.	Ansonia.	Beacon Falls.	Bethany.	Branford.	Cheshire.	Derby.	East Haven.	Guilford.	Hamden.	Madison.	Meriden.	Middlebury.	Milford.	Naugatuck.	North Branford.	North Haven.	Orange.	Oxford.	Prospect.	Seymour.	Southbury.	Wallingford.	Waterbury.	Wolcott.		Woodbridge.	
Fistula.....	2	2																									2		
Peritonitis (not puerperal).....	82	6						2							1					2					2		16		
Ascites.....	5	1																							1		2		
Gallstones.....	7	2																									3		
Cirrhosis of Liver.....	102	13	2					1	2							1								7			28		
Hepatitis.....	28	5	2							1				1					1					2			12		
Jaundice.....	8	1									1																3		
Other Diseases of Liver.....	66	7														1								5			13		
Other Diseases of Digestive System.....	73	5					1	1			3	1	2	1					2					3			19		
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																													
Addison's Disease.....	5	2																									2		
Disease of Spleen.....	2																		1								1		
Diseases of Lymphatic System.....	6	1																									1		
ORDER 7. OF URINARY SYSTEM.																													
Nephritis.....	245	63	6	1				1	3		1		3							1		1			1	10		91	
Bright's Disease.....	487	46	4		1		2	3		4	1		9	1	6	2	1		3							3	21		109

TABLE VI—CONTINUED. NEW HAVEN COUNTY.

CAUSES OF DEATH.		STATE.		New Haven.	Ansonia.	Beacon Falls.	Bethany.	Branford.	Cheshire.	Derby.	East Haven.	Guilford.	Hamden.	Madison.	Meriden.	Middlebury.	Millford.	Naugatuck.	North Branford.	North Haven.	Orange.	Oxford.	Prospect.	Seymour.	Southbury.	Wallingford.	Waterbury.	Wolcott.	Woodbridge.	TOTAL.	
ORDER 10. OF INTEGRUMENTARY SYSTEM.		21	3												1				1							1				6	
Other Diseases of Integrumentary System.....																															
Class VII.—Violence.																															
ORDER 1. ACCIDENT AND NEGLIGENCE.		107	13				1	1					3		2			1				1					9			31	
Fracture and Contusions.....		130	10	2	1										3	1	2	1							1	3	2			27	
Railroad Injuries.....		24	1															1	1								1			4	
Gun-Shot Wounds.....		84	4	2					1				3		1	1	3								1		6			22	
Burns and Scalds.....		47	10	1											3		1										7			22	
Poisoned.....		115	7	1	1	1	2	4			1				2	3	1				2					2				26	
Drowning.....		13		1													1													2	
Suffocation.....		236	24	3			1	1		1					10		1				3	1		3	2	3	16				67
Other Accidents.....																															
ORDER 2. HOMICIDE		4	2																											2	
Murder.....																															

RECAPITULATION OF NEW HAVEN COUNTY.

CLASSIFIED DISEASES.	STATE.																										Total.		
	New Haven.	Ansonia.	Beacon Falls.	Bethany.	Brandon.	Cheshire.	Derby.	East Haven.	Guilford.	Hamden.	Madison.	Menden.	Middlebury.	Milford.	Naugatuck.	North Branford.	North Haven.	Orange.	Oxford.	Prospect.	Seymour.	Southbury.	Wallingford.	Waterbury.	Wolcott.	Woodbridge.			
All causes	14381	1721	178	14	9	99	29	156	16	41	74	26	378	8	66	170	21	34	90	17	8	58	20	127	786	2	7	4153	
Classes.																													
I. Zymotic Diseases.....	2878	281	43	2	1	19	3	35	3	10	15	5	83	12	50	5	10	17	4	4	15	3	30	187	3	840	2		
II. Parasitic Diseases.....	3	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	33			
III. Dietetic Diseases.....	94	13	1	1	1	2	4	24	4	8	11	2	79	3	18	5	4	13	1	10	30	133	1	730	1	730			
IV. Constitutional Diseases.....	2451	328	32	1	20	4	24	4	8	11	2	79	3	18	5	4	13	1	10	30	133	1	730	1	730				
V. Developmental Diseases.....	855	109	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	247			
VI. Local Diseases.....	6755	847	74	8	7	40	21	74	6	19	40	17	160	5	33	78	6	18	41	7	2	23	11	41	342	2	3	1926	
VII. Violence.....	850	88	11	2	1	6	1	6	1	2	6	1	11	1	8	11	1	8	2	3	3	9	45	1	236	1	236		
VIII. Ill-defined and cause not stated.....	495	54	12	1	1	7	1	6	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	140	1	140	
Class I.—Orders.																													
1. Miasmatic Diseases.....	1434	118	13	1	12	15	1	2	7	2	38	3	22	5	8	5	2	1	7	1	17	65	1	346	1	346			
2. Diarrhical Diseases.....	1180	122	26	1	4	3	16	1	4	6	1	34	7	23	2	7	2	3	8	2	13	108	2	395	2	395			
3. Malarial Diseases.....	127	22	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	64	1	64	
4. Zoonogenous Diseases.....	20	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	5	1	5	
5. Venereal Diseases.....	117	15	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	40	1	40	
6. Septic Diseases.....	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	2	
Class II.—Orders.																													
Parasitic Diseases.....	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	2

TABLE VI.
NOSOLOGICAL ARRANGEMENT BY TOWNS—NEW LONDON COUNTY.

CAUSES OF DEATH.	TOWNS.																							Total.
	State.	New London.	Borrah.	Colchester.	East Lyme.	Franklin.	Griswold.	Groton.	Lebanon.	Ledyard.	Lisbon.	Lyme.	Montville.	Norwich.	No. Stonington.	Old Lyme.	Preston.	Salem.	Sprague.	Stonington.	Voluntown.	Waterford.		
Class I.—Zymotic Diseases.	ORDER I. Miasmatic.	Measles	46												2								6	
		Scarlet Fever	50							1	2							1					3	
		Influenza	660	12			3	2	1	4	1	2		3	10		2			1	6	2	54	
		Typhoid Fever	186	4						3		1	2			1					2	2	15	
		Cerebro-Spinal Fever	90	3			1																4	
		Continued Fever	23												1						1		2	
		Whooping Cough	139						1	1											2		4	
		Diphtheria	173	4			1					1			4								11	
		Membranous Croup	64	1		1										3				1			7	
		Mumps	3																				1	

ORDER 2. DIARRHOEAL.														
Cholera Infantum.....	533	10	1	1	4	3	1	2	14	1	6	3	45	
Infantile Diarrhoea.....	425	12			1	5			1		2		25	
Cholera Morbus.....	25			1			1					1	4	
Dysentery.....	161	5		2			1		6	1		1	16	
Diarrhoea.....	46	1			1	2			1				1	6
ORDER 3. MALARIAL.														
Intermittent Fever.....	13													
Remittent Fever.....	19	1											1	
Perniciou or Congestive Fever.....	15													
Other Malarial Diseases.....	80					1			1	1	2		5	
ORDER 4. ZOOGENOUS.														
ORDER 5. VENEREAL.														
Syphilis.....	19													
Gonorrhoea, Stricture of Urethra.....	1													
ORDER 6. SEPTIC.														
Erysipelas.....	32								2				2	
Pyæmia, Septicæmia.....	49	3							1			1	5	
Puerperal Fever.....	36	1					1				1		3	
Class II.—Parasitic Diseases.														
Thrush.....	2													
Other Parasitic Diseases.....	1													

TABLE VI—CONTINUED. NEW LONDON COUNTY.

CAUSES OF DEATH.	STATE.	New London.	Bozrah.	Colchester.	East Lyme.	Franklin.	Griswold.	Groton.	Lebanon.	Ledyard.	Lisbon.	Lyme.	Montville.	Norwich.	No. Stonington.	Old Lyme.	Preston.	Salem.	Sprague.	Stonington.	Voluntown.	Waterford.	Total.
Class III.—Dietetic Diseases.																							
Starvation	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Intemperance	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chronic Alcoholism	66	1	—	—	—	1	1	1	1	—	—	—	—	—	—	—	—	—	1	—	—	—	6
Delirium Tremens	8	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Other Dietetic Diseases	6	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Class IV.—Constitutional Diseases.																							
Rheumatism	105	3	—	—	1	—	—	1	—	—	—	—	—	1	2	—	1	—	—	2	—	—	12
Gout	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rickets	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cancer of Breast	71	2	—	—	—	—	—	2	—	—	—	—	—	3	—	—	—	—	—	—	—	2	9
Cancer of Stomach	100	2	—	—	—	—	2	2	—	—	—	—	1	5	—	1	—	—	—	—	—	—	11
Cancer of Womb	90	1	—	—	—	—	—	—	—	—	—	—	—	5	—	—	—	—	—	1	—	—	7
Cancer of other Organs	308	4	—	1	—	—	1	2	—	—	1	—	2	8	—	—	3	—	—	3	1	—	26
Tabes Mesenterica	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tubercular Meningitis. Acute Hydroceph.	69	—	—	—	—	—	1	—	—	—	—	—	—	4	—	—	2	—	—	—	—	—	7
Phthisis	1451	36	2	1	2	3	6	5	3	2	—	1	2	26	—	1	2	—	3	14	1	—	2112

Other forms of Tuberculosis	56	1	1	1	3	5
Scrofula	13	1	1	1	1	1
Pott's Disease	6	1	1	1	1	1
Hip-Joint Disease	2	1	1	1	1	1
Purpura	7	1	1	1	1	1
Anæmia	48	1	1	1	1	3
Diabetes	112	3	1	1	6	12
Other Constitutional Diseases	2	1	1	1	1	1

Class V.—Developmental Diseases.

Premature Birth	358	9	1	1	1	2	30
Atelectasis	24	1	2	1	1	1	3
Cyanosis	26	1	1	1	1	1	1
Spina Bifida	7	1	1	1	1	1	1
Imperforate Anus	1	1	1	1	1	1	1
Other Congenital Malformations	48	3	1	1	1	1	5
Umbilical Hemorrhage	9	1	1	1	1	1	1
Old Age	382	10	6	2	1	1	36

Class VI.—Local Diseases.**ORDER 1. OF NERVOUS SYSTEM.**

Inflammation of Brain or its Membranes	273	8	1	1	1	1	1	26
Apoplexy	773	10	2	1	4	2	1	2
Softening of Brain	61	1	1	1	1	1	1	66
Hydrocephalus, not acute	18	2	1	1	1	1	1	6
Hemiplegia	42	1	1	1	1	1	1	3
Paralysis Agitans	2	1	1	1	1	1	1	5

TABLE VI—CONTINUED. NEW LONDON COUNTY.

CAUSES OF DEATH.	State.	New London.	Borsh.	Colchester.	East Lyme.	Franklin.	Griswold.	Groton.	Lebanon.	Ledyard.	Lisbon.	Lyme.	Montville.	Norwich.	No. Stonington.	Old Lyme.	Preston.	Salem.	Sprague.	Stonington.	Voluntown.	Waterford.	TOTAL.
Insanity.....	83				3			2						3									8
Chorea.....	6																						
Epilepsy.....	47							1						3					1				5
Convulsions.....	201	3					1	4	1					6					1	4		1	21
Trismus Nascentium.....	7							1															1
Tetanus.....	14																						1
Paraplegia.....	5	1																					1
Diseases of Spinal Cord.....	19	1							1														1
Myelitis.....	2																						2
Spinal Meningitis.....	28	1											1							1			3
Locomotor Ataxia.....	16																						1
Other Diseases of Nervous System.....	237	8			1	1	2	3				1		3						1	1	1	21
ORDER 2. OF ORGANS OF SPECIAL SENSE.																							
Epistaxis.....	1																						1
Otitis.....	13																						1
ORDER 3. OF CIRCULATORY SYSTEM.																							
Endocarditis.....	109	3												2									7
Valvular Disease of Heart.....	411	11	1	3		1	2	2			1		1	16						7	1	1	51
Disease of Heart.....	508	14	1	1			3	2	2		1	2	1	16	8	2	2		1	4			56
Pericarditis.....	11								1														1

[illegible]

ORDER 4. OF RESPIRATORY SYSTEM.

[illegible]

ORDER 5. OF DIGESTIVE SYSTEM.

[illegible]

TABLE VI—CONTINUED. NEW LONDON COUNTY

CAUSES OF DEATH.	STATE.		New London.	Bozrah.	Colchester.	East Lyme.	Franklin.	Griswold.	Groton.	Lebanon.	Ledyard.	Lisbon.	Lyme.	Montville.	Norwich.	No. Stonington.	Old Lyme.	Preston.	Salem.	Sprague.	Stonington.	Voluntown.	Waterford.	Total.
Fistula.....	2																							
Peritonitis (not puerperal).....	82	4	1						1	1	1				2						1			11
Ascites.....	5																							
Gallstones.....	7																							
Cirrhosis of Liver.....	102	2													3						1			6
Hepatitis.....	28	1																						1
Jaundice.....	8																							
Other Diseases of Liver.....	66	1		1											2	1					1			6
Other Diseases of Digestive System.....	73		1																		1			2
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS																								
Addison's Disease.....	5																							
Disease of Spleen.....	2																							
Diseases of Lymphatic System.....	6																1							1
ORDER 7. OF URINARY SYSTEM.																								
Nephritis.....	245	15		1	4				1					1	13			1						36
Bright's Disease.....	487	7		1			1	3					4	1	5	1	4	3			4	1	10	47

	62	1	2	1	1	1	1	1	2	7
Uræmia.....										7
Suppression of Urine.....										3
Calculus.....	8									8
Disease of Bladder.....	70			1					3	3
Prostatitis.....	22								1	1
Other Diseases of Urinary System	16	1							1	1
<hr/>										
ORDER 8. OF GENERATIVE SYSTEM.										
<i>A. Diseases of the Reproductive Organs.</i>										
Diseases of the Uterus.....	20									- -
Méritis.....	6									- -
Disease of Ovaries.....	8									6
Disorders of Menstruation	3									- -
Pelvic Abscess.....	3									3
Diseases of Testis, Penis, Scrotum, etc.	1									- -
<hr/>										
<i>B. Diseases of Parturition.</i>										
Abortion and Miscarriage.....	21	1								1
Puerperal Mania.....	1									- -
Puerperal Convulsions.....	23	1								1
Puerperal Hemorrhage.....	6									- -
Placenta Previa.....	4								1	1
Other Accidents of Childbirth.....	108	3							2	1 7
<hr/>										
ORDER 9. OF ORGANS OF LOCOMOTION.										
Caries, Necrosis.....	5									- -
Arthritis, Periostitis.....	1									- -
Other Diseases of Organs of Locomotion	1									- -

TABLE VI—CONTINUED. NEW LONDON COUNTY.

CAUSES OF DEATH.	NEW LONDON COUNTY.																						
	STATE.	New London.	Borrah.	Colchester.	East Lyme.	Franklin.	Griswold.	Groton.	Lebanon.	Ledyard.	Lisbon.	Lyme.	Montville.	Norwich.	No. Stonington.	Old Lyme.	Preston.	Salem.	Sprague.	Stonington.	Voluntown.	Waterford.	TOTAL.
ORDER 10. OF INTEGUMENTARY SYSTEM.																							
Other Diseases of Integumentary System....	21	1												2									3
Class VII.—Violence.																							
ORDER 1. ACCIDENT AND NEGLIGENCE.																							
Fractures and Contusions	107	4						1						7							2		13
Railroad Injuries	130	3			1		1	2						3									12
Gun-Shot Wounds	24	1												1									2
Burns and Scalds	84	5						2						2			1				1		11
Poisoned	47																						2
Drowning	115	6			1		2	1						4			1			1			17
Suffocation	13							1															1
Other Accidents	235	6					3				1			8						2			20
ORDER 2. HOMICIDE.																							
Murder	4																						

Class III.—Orders.

Dietetic Diseases

94 1 1 2 1 1 1 7

Class IV.—Orders.

Constitutional Diseases

2451 53 2 2 3 3 10 13 3 2 1 1 5 64 2 1 10 3 20 2 7 207

Class V.—Orders.

Developmental Diseases

855 23 1 9 3 1 1 4 17 1 9 2 76

Class VI.—Orders.

1. Diseases of Nervous System

2. Organs of Special Sense

3. Circulatory System

4. Respiratory System

5. Digestive System

6. Lymph. Sys. and Ductless Glands

7. Urinary System

8. Generative System

9. Organs of Locomotion

10. Integumentary System

 1833 34 2 6 3 5 17 6 1 3 3 60 1 3 3 3 13 5 168
 14
 1230 29 2 5 1 1 5 4 5 1 2 3 2 40 3 3 5 1 13 1 3 129
 1688 31 3 1 1 5 13 2 3 1 4 49 2 3 5 1 14 1 8 147
 832 23 2 1 4 1 1 21 1 3 1 1 7 2 1 70
 13
 913 23 1 4 4 2 5 4 3 24 1 4 4 1 7 1 10 100
 204 5
 7
 9
 10 2 3

Class VII.—Orders.

1. Accident or Negligence

2. Homicide

3. Suicide

4. Execution

 755 25 2 6 7 1 25 2 1 6 2 2 79
 4
 91 1 3 1 1 7

Class VIII.—Orders.

1. Ill defined

2. Cause not stated

 460 12 4 1 1 1 2 13 1 2 9 1 47
 35 1 1

TABLE VI—Continued.
FAIRFIELD COUNTY.

CAUSES OF DEATH.	STATE.	Danbury.	Bridgport.	Bethel.	Brookfield.	Darien.	Easton.	Fairfield.	Greenwich.	Huntington.	Monroe.	New Canaan.	New Fairfield.	Newtown.	Norwalk.	Redding.	Ridgefield.	Sherman.	Stamford.	Stratford.	Trumbull.	Weston.	Westport.	Wilton.	TOTAL.
Class I.—Zymotic Diseases.																									
ORDER 1. MIASMATIC.																									
Measles	46	—	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	9
Scarlet Fever	50	—	8	—	—	—	—	—	6	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	16
Influenza	660	14	29	—	—	—	—	3	4	3	3	1	—	217	2	1	2	9	3	1	3	1	4	1	101
Typhoid Fever	186	2	8	—	2	—	—	—	2	3	—	—	—	—	3	2	1	—	1	—	1	—	—	—	25
Cerebro-Spinal Fever	90	19	3	1	—	1	—	—	1	—	—	—	—	1	2	1	1	—	2	—	—	—	—	—	31
Continued Fever	23	—	3	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	5
Whooping Cough	139	—	22	1	—	—	—	—	3	1	—	—	—	—	9	—	—	—	7	—	—	—	2	—	45
Diphtheria	173	13	6	1	—	—	—	—	1	1	1	—	—	—	3	—	—	—	—	—	—	—	1	—	26
Membranous Croup	64	—	4	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	1	—	8
Other Miasmatic Diseases	3	—	2	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3

ORDER 2. DIARRHEAL.																	
Cholera Infantum.....	523	6	51	2	2	8	8	4	1	3	3	8	1	2	11	4	114
Infantile Diarrhoea.....	425	3	34	1	1	3	12	5				11	1	1	8	1	5
Cholera Morbus.....	25	1	2				1									1	5
Dysentery.....	161	3	3				2	1		3		2			3	1	18
Diarrhoea.....	46	1					2	1							1		6
ORDER 3. MALARIAL.																	
Intermittent Fever.....	13	1			1	1											4
Remittent Fever.....	19	2		1													3
Perniciou or Congestive Fever.....	15	2	1									1					4
Other Malarial Diseases.....	80	1	5		1	1	1				1	4			1	1	18
ORDER 4. ZOOGENOUS.																	
ORDER 5. VENEREAL.																	
Syphilis.....	19	3					1						1				5
Other Zoogenous Diseases.....	1																
ORDER 6. SEPTIC.																	
Krysipelas.....	32	1									1	1			3		6
Pyæmia, Septicæmia.....	49	2	2				2								1		7
Puerperal Fever.....	36	1	2				3										6
Class II.—Parasitic Diseases.																	
Thrush.....	2																
Other Parasitic Diseases.....	1																

TABLE VI.—CONTINUED. FAIRFIELD COUNTY.

CAUSES OF DEATH.																								
Class III.—Dietetic Diseases.																								
Starvation	5																	1						1
Intemperance	9																							
Chronic Alcoholism	66		6						3			1			2			1						13
Delirium Tremens	8																				1			1
Other Dietetic Diseases	6																							
Class IV.—Constitutional Diseases.																								
Rheumatism	105	2	9	1		3			1	1			1	4				1						23
Gout	1																							
Rickets	6																							
Cancer of Breast	71	1	5			1			2					2	2	1	4	2	2	1	1	2		17
Cancer of Stomach	100	4	8							1				2	1	1	4					1		22
Cancer of Womb	90	6	3	1					1	1			1		3		6	2	1			1		36
Cancer of other Organs	308	8	22	1	2		1	1	3			1		2	7	4	9	9		2	1	3		67
Tabes Mesenterica	4																							
Tubercular Meningitis, Acute Hydroceph.	69		11															2						13
Phthisis	1451	37	126	3	2	12		4	10	10	2	4	1	8	26	3	4	27	9	2	1	7	1	299

Other forms of Tuberculosis.....	56	2	12	1	1	1	1	1	1	1	1	19
Scrofula.....	13	3	8	1	1	1	1	1	1	1	1	1
Pott's Disease.....	6	1	1	1	1	1	1	1	1	1	1	4
Rip-Joint Disease.....	2	1	1	1	1	1	1	1	1	1	1	1
Purpura.....	7	1	1	1	1	1	1	1	1	1	1	7
Anæmia.....	48	1	2	1	1	1	1	1	1	1	1	27
Diabetes.....	112	5	8	1	1	1	1	1	1	1	1	27
Other Constitutional Diseases.....	2	1	1	1	1	1	1	1	1	1	1	1

Class V.—Developmental Diseases.

Premature Birth.....	358	4	25	2	1	2	1	3	2	4	1	61
Atelectasis.....	24	2	2	1	1	1	1	1	1	1	1	4
Cyanosis.....	26	3	1	1	1	1	1	1	1	1	1	6
Spina Bifida.....	7	1	1	1	1	1	1	1	1	1	1	1
Imperforate Anus.....	1	1	1	1	1	1	1	1	1	1	1	1
Other Congenital Malformations.....	48	1	1	1	1	1	1	1	1	1	1	6
Umbilical Hemorrhage.....	9	1	1	1	1	1	1	1	1	1	1	1
Old Age.....	382	6	12	1	2	6	4	1	1	1	1	57

Class VI.—Local Diseases.**ORDER 1. OF NERVOUS SYSTEM.**

Inflammation of Brain or its Membranes.....	273	13	19	2	2	4	1	5	2	3	6	1	2	59
Apoplexy.....	773	19	41	4	4	8	3	14	3	1	1	27	2	161
Softening of Brain.....	61	1	1	1	1	1	1	1	1	1	1	1	1	9
Hydrocephalus, not acute.....	18	1	1	1	1	1	1	1	1	1	1	1	1	3
Hemiplegia.....	42	3	3	1	1	1	1	2	2	2	1	1	1	10
Paralysis Agitans.....	3	1	1	1	1	1	1	1	1	1	1	1	1	1

TABLE VI--CONTINUED. FAIRFIELD COUNTY.

CAUSES OF DEATH.	STATE.	Danbury.	Bridgeport.	Bethel.	Brookfield.	Darien.	Raston.	Fairfield.	Greenwich.	Huntington.	Monroe.	New Canaan.	New Fairfield.	Newtown.	Norwalk.	Redding.	Ridgefield.	Sherman.	Stamford.	Stratford.	Trumbull.	Weston.	Westport.	Willton.	Total.
		83	6				1	1	4	1		1			2				6			3		24	
Insanity	5																							7	
Chorea	47	1	1	1	1	1		2							1	1			2					42	
Epilepsy	201	2	21	1	1	1	1							6					7				1		
Convulsions	7																								
Trismus Nascentium	14	1	1																2					4	
Tetanus	5																							1	
Paraplegia	19	1	1	1	1	1								1	1				1					1	
Diseases of Spinal Cord	2																								
Myelitis	28	6	6											1	1				1					7	
Spinal Meningitis	16	2	2					1						1	1									5	
Locomotor Ataxia	237	2	13	1	1	2	1	2	3				1	3	6	1			9					44	
Other Diseases of Nervous System																									
ORDER 2. OF ORGANS OF SPECIAL SENSE.																									
Epistaxis	1																								
Otitis	13	2	2									2							1					5	
ORDER 3. OF CIRCULATORY SYSTEM.																									
Endocarditis	109	3	20					1	3			1			5	1	1	1						36	
Valvular Disease of Heart	411	6	16	1		4			5	2		1	1	4	3		1	1	1	2	3	1	1	68	
Disease of Heart	508	17	26	2	1	4	3	5	2	2	1	3	1	5	5				11	2	2		72	101	
Pericarditis	11														1				1					2	

Angina Pectoris.....	51	2	---	---	---	1	---	---	---	1	1	2	2	---	---	11
Aneurism.....	11	1	---	---	---	---	1	---	---	---	---	---	---	---	---	2
Senile Gangrene.....	33	4	---	---	---	---	---	---	---	---	---	---	---	---	---	5
Thrombosis, Embolism.....	42	1	5	1	---	1	---	---	---	---	---	---	---	---	---	9
Phlebitis.....	6	2	---	---	---	---	---	---	---	---	---	---	---	---	---	2
Other Diseases of Circulatory System.....	48	1	3	1	---	---	---	---	---	---	---	---	---	---	---	7

ORDER 4. OF RESPIRATORY SYSTEM.

Laryngitis.....	22	1	1	1	---	1	---	---	---	---	---	---	---	---	---	7
Catarrhal Croup.....	11	1	---	---	---	---	---	---	---	---	---	---	---	---	---	1
Emphysema, Asthma.....	37	3	1	---	---	---	---	---	---	---	---	---	---	---	---	9
Bronchitis.....	419	9	33	3	2	1	2	6	2	---	---	1	8	3	---	91
Pneumonia.....	1058	20	90	2	6	1	5	6	4	3	---	---	2	15	1	191
Pleurisy.....	33	2	---	---	---	---	---	---	---	---	---	---	---	---	---	3
Other Diseases of Respiratory System.....	108	2	7	---	---	1	---	---	---	---	---	2	1	1	---	22

ORDER 5. OF DIGESTIVE SYSTEM.

Stomatitis.....	5	2	---	---	---	---	---	---	---	---	---	---	---	---	---	2
Dentition.....	8	5	---	---	---	---	---	---	---	---	---	---	---	---	---	5
Quinsy.....	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Dyspepsia.....	29	6	---	---	---	---	---	---	---	---	---	---	---	---	---	6
Hæmatemesis.....	7	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Disease of Stomach.....	141	2	10	1	---	1	2	1	---	---	1	7	1	---	---	29
Ulcer of Stomach.....	23	1	---	---	---	---	---	---	---	---	---	---	---	---	---	2
Enteritis.....	91	2	7	---	2	1	1	---	---	---	---	---	---	2	---	18
Appendicitis.....	48	2	5	---	---	1	2	---	---	---	---	---	---	---	---	11
Ulceration of Intestines.....	6	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Obstruction of Intestines.....	54	5	---	---	---	---	---	---	---	---	---	---	1	---	---	10
Intussusception of Intestines.....	11	3	---	---	---	---	---	---	---	---	---	---	---	---	---	4
Hernia.....	29	1	1	---	---	---	---	---	---	---	---	---	---	---	---	3

TABLE VI—CONTINUED. FAIRFIELD COUNTY.

CAUSES OF DEATH.	FAIRFIELD COUNTY.														TOTAL.									
	State.	Danbury.	Bridgeport.	Bethel.	Brookfield.	Darien.	Easton.	Fairfield.	Greenwich.	Huntington.	Monroe.	New Canaan.	New Fairfield.	Newtown.	Norwalk.	Redding.	Sherman.	Stamford.	Stratford.	Trumbull.	Weston.	Westport.	Willton.	
Fistula	2														4	1		1						18
Pertinitis (not puerperal)	82	2	7	1		1			1															1
Ascites	5		1																					1
Gallstones	7	1	1																					2
Cirrhosis of Liver	102	2	8	1	1	2			1	2		1			3			2			1			24
Hepatitis	28		2	1		1			1											1				6
Jaundice	8																							1
Other Diseases of Liver	66	1	2					2	3					1	1		1	2			1			13
Other Diseases of Digestive System	73	1	6										1	2	2			2		1				16
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																								
Addison's Disease	5																							2
Disease of Spleen	2														2									
Diseases of Lymphatic System	6		2																					2
ORDER 7. OF URINARY SYSTEM.																								
Nephritis	245	2	20			2									6	1	3	11	1				1	55
Bright's Disease	487	17	40		5		1		7	3	5	1	2	8	13	3	9	6						108

Uremia.....	62	1	7	1					1							3			1		16
Suppression of Urine.....	3															1					1
Calculus.....	8	2														1					1
Disease of Bladder.....	70		4		2				1	3						2			3		3
Prostatitis.....	22	2	1																		17
Other Diseases of Urinary System.....	16	1	1													1					2

ORDER 8. OF GENERATIVE SYSTEM.

A. Diseases of the Reproductive Organs.

Diseases of the Uterus.....	20	1	2						2							1					6
Metritis.....	6		1																		3
Disease of Ovaries.....	8		2																		2
Disorders of Menstruation.....	3															1					1
Pelvic Abscess.....	3																				
Diseases of Testis, Penis, Scrotum, etc.....	1																				

B. Diseases of Parturition.

Abortion and Miscarriage.....	21		2		1																3
Puerperal Mania.....	1																				
Puerperal Convulsions.....	23		2		1											1					6
Puerperal Hemorrhage.....	6																				
Placenta Previa.....	4																				
Other Accidents of Childbirth.....	108		15						1	1						1	1		1		23

ORDER 9. OF ORGANS OF LOCOMOTION.

Caries, Necrosis.....	6																				
Arthritis, Periostitis.....	1																				
Other Diseases of Organs of Locomotion.....	1																				

TABLE VI—CONTINUED. FAIRFIELD COUNTY.

CAUSES OF DEATH.	FAIRFIELD COUNTY.																	TOTAL.							
	STATE.	Danbury.	Bridgeport.	Bethel.	Brookfield.	Darien.	Easton.	Fairfield.	Greenwich.	Huntington.	Monroe.	New Canaan.	New Fairfield.	Newtown.	Norwalk.	Redding.	Ridgefield.	Sherman.	Stamford.	Stratford.	Trumbull.	Weston.	Westport.	Wilton.	
ORDER 10. OF INDEMENTARY SYSTEM.	21	1	1							1					2				1					1	
Other Diseases of Indementary System.....																									
Class VII.—Violence.																									
ORDER 1. ACCIDENT AND NEGLIGENCE.																									
Fractures and Contusions.....	107	1	6	2	1				1	1					2				5	1	1				21
Railroad Injuries.....	130	2	7			3			2						2				25				1		42
Gun-Shot Wounds.....	24		3											1											5
Burns and Scalds.....	84	2	8	1					3	2		1			1	1			1			1			22
Poisoned.....	47	1	3	1																					7
Drowning.....	116	4	10						2	1				1	6				3	1			1		28
Suffocation.....	13		2																						3
Other Accidents.....	235	4	22	1				1	4	1		1		1	1				5	4					45
ORDER 2. HOMICIDE.																									
Murder.....	4		1																						1

RECAPITULATION OF FAIRFIELD COUNTY.

CLASSIFIED DISEASES.																								
All causes																								
STATE.	Danbury.	Bridgeport.	Bethel.	Brookfield.	Darien.	Easton.	Fairfield.	Greenwich.	Huntington.	Monroe.	New Canaan.	New Fairfield.	Newtown.	Norwalk.	Redding.	Ridgefield.	Sherman.	Stamford.	Stratford.	Trumbull.	Weston.	Westport.	Wilton.	TOTAL.
14381	303	1076	43	25	75	18	68	174	81	16	37	11	66	290	20	43	13	316	77	29	13	66	33	2892
Classes.																								
I. Zymotic Diseases																								
II. Parasitic Diseases																								
III. Diabetic Diseases																								
IV. Constitutional Diseases																								
V. Developmental Diseases																								
VI. Local Diseases																								
VII. Violence																								
VIII. Ill-defined and cause not stated																								
Class I.—Orders.																								
1. Miasmatic Diseases																								
2. Diarrhoeal Diseases																								
3. Malarial Diseases																								
4. Zoonogenous Diseases																								
5. Venereal Diseases																								
6. Septic Diseases																								
Class II.—Orders.																								
Parasitic Diseases																								

Class III.—Orders.

Dietetic Diseases

94 6 3 1 2 1 1 1 15

Class IV.—Orders.

Constitutional Diseases

2451 66 210 7 5 16 2 7 19 12 5 6 3 12 51 3 9 2 52 12 7 2 14 4 526

Class V.—Orders.

Developmental Diseases

855 10 44 3 1 4 1 2 9 7 2 7 1 7 10 1 2 12 5 3 1 2 1 135

Class VI.—Orders.

1. Diseases of Nervous System

1833 37 116 6 6 11 6 10 23 11 1 2 11 39 7 8 1 64 5 6 5 376

2. Organs of Special Sense

14 2

3. Circulatory System

1230 29 78 3 3 8 3 8 13 4 1 5 2 9 18 1 3 3 27 6 1 8 3 241

4. Respiratory System

1688 35 137 4 3 8 3 8 12 7 3 1 7 33 1 1 1 36 4 1 2 13 4 324

5. Digestive System

832 14 71 5 1 6 1 6 12 2 1 1 4 23 2 1 13 4 1 2 170

6. Lymph. Sys. and Ductless Glands

13 2

7. Urinary System

913 24 73 1 9 2 13 9 1 2 3 22 1 6 27 7 1 4 205

8. Generative System

204 1 24 2 1 1 1 1 2 1 3 1 1 41

9. Organs of Locomotion

7

10. Integumentary System

21 1 1 1 2 1 1 6

Class VII.—Orders.

1. Accident or Negligence

755 14 61 5 1 3 1 12 5 2 3 11 2 1 14 32 1 2 1 172

2. Homicide

4 1

3. Suicide

91 2 12 1 3 1 1 1 1 1 1 22

4. Execution

Class VIII.—Orders.

1. Ill defined

460 6 38 2 3 10 4 1 9 2 12 1 1 1 1 92

2. Cause not stated

35 1 1 1 1 1 4

TABLE VI—Continued.
WINDHAM COUNTY.

CAUSES OF DEATH.	State.	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Pomfret.	Putnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.	TOTAL.
Class I.—Zymotic Diseases.																	
ORDER 1. Miasmatic.																	
Measles	46								1					1			2
Scarlet Fever	50								1					1			2
Influenza	660	7		3		1	4	1	4		3		1	7	13	2	46
Typhoid Fever	186				1			2	1	1						1	6
Cerebro-Spinal Fever	90							1	2		2		1				6
Continued Fever	23																
Whooping Cough	139							1					1	2	1		6
Diphtheria	173							2						2	1		5
Membranous Croup	64										2			1			3
Other Miasmatic Diseases	3																

ORDER 2. DIARRHOEAL.											
Cholera Infantum.....	523	2	1	9	3	1	2	3	5	26	
Infantile Diarrhoea.....	425			2	5	7	1	5	1	21	
Cholera Morbus.....	25										
Dysentery.....	161	1		1		1			4	7	
Diarrhoea.....	46			1				1	1	3	
ORDER 3. MALARIAL.											
Intermittent Fever.....	13										
Remittent Fever.....	19										
Pernicious or Congestive Fever.....	15	1			1					2	
Other Malarial Diseases.....	80	1		2	1					4	
ORDER 4. ZOOGENOUS.											
ORDER 5. VENEREAL.											
Syphilis.....	19										
Gonorrhoea, Stricture of Urethra.....	1										
ORDER 6. SEPTIC.											
Erysipelas.....	32					1				1	
Pyæmia, Septicæmia.....	49						1			1	
Puerperal Fever.....	36	1							2	3	
Class II.—Parasitic Diseases.											
Thrush.....	2										
Other Parasitic Diseases.....	1										

TABLE VI.—CONTINUED. WINDHAM COUNTY.

CAUSES OF DEATH.	State.	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Powtrett.	Putnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.	TOTAL.
Class III.—Dietetic Diseases.																	
Starvation	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	5
Intemperance	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9
Chronic Alcoholism	66	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	66
Delirium Tremens	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8
Other Dietetic Diseases	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6
Class IV.—Constitutional Diseases.																	
Rheumatism	105	—	—	—	—	—	—	1	2	—	—	1	—	1	—	—	5
Gout	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Rickets	6	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	2
Cancer of Breast	71	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	2
Cancer of Stomach	100	1	1	—	—	—	—	2	—	—	1	—	—	—	1	—	6
Cancer of Womb	90	—	1	—	—	—	—	—	1	—	—	—	—	—	2	—	5
Cancer of other Organs	308	—	—	—	—	—	—	1	4	1	3	1	—	2	2	3	17
Typhoid	4	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	4
Tubercular Meningitis, Acute Hydroceph.	69	1	—	—	—	—	—	—	1	1	1	—	—	—	—	—	4
Phtisis	1451	3	—	2	—	1	—	11	11	3	9	3	2	8	20	8	76

[illegible]

Class VI.—Local Diseases.

ORDER 1. OF NERVOUS SYSTEM.

Inflammation of Brain or its Membranes
Apoplexy
Softening of Brain
Hydrocephalus, not acute
Hemiplegia
Paralysis Agitans

TABLE VI—CONTINUED. WINDHAM COUNTY.

CAUSES OF DEATH.	LOCALITIES.																
	STATE.	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Pomfret.	Pulnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.	Total.
Insanity.....	83	---	---	---	---	---	---	1	---	---	---	---	---	---	---	---	1
Chorea.....	5	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	3
Epilepsy.....	47	---	---	1	---	---	---	---	---	---	---	---	---	---	---	1	1
Convulsions.....	201	---	---	---	1	---	---	3	---	1	2	---	1	---	3	---	11
Triamus Nascentium.....	7	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	11
Tetanus.....	14	---	---	---	---	---	---	---	---	1	---	---	---	---	1	---	2
Paraplegia.....	5	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	2
Diseases of Spinal Cord.....	19	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1
Myelitis.....	2	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1
Spinal Meningitis.....	28	---	---	---	---	---	---	---	---	---	---	---	---	---	2	---	2
Locomotor Ataxia.....	16	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	19
Other Diseases of Nervous System.....	237	2	2	5	---	2	---	2	1	---	3	---	---	2	---	---	19
ORDER 2. OF ORGANS OF SPECIAL SENSE.																	
Epistaxis.....	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1
Otitis.....	13	---	---	---	---	---	---	---	1	---	---	---	---	---	---	1	2
ORDER 3. OF CIRCULATORY SYSTEM.																	
Endocarditis.....	109	---	---	---	---	---	---	---	---	---	---	---	---	---	1	1	2
Valvular Disease of Heart.....	411	2	---	1	---	---	---	4	1	2	3	---	1	3	19	2	38
Disease of Heart.....	508	1	6	2	2	1	1	9	6	---	7	---	1	4	6	5	48
Pericarditis.....	11	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1

Angina Pectoris.....	51	1	1	1	1	1	1	1	1	1	1	3
Aneurism.....	11	1	1	1	1	1	1	1	1	1	1	1
Senile Gangrene.....	33	1	1	1	1	1	1	1	1	1	1	5
Thrombosis, Embolism.....	42	1	1	1	1	1	1	1	1	1	1	2
Phlebitis.....	6	1	1	1	1	1	1	1	1	1	1	3
Other Diseases of Circulatory System.....	48	1	1	1	1	1	1	1	1	1	1	3

ORDER 4. OF RESPIRATORY SYSTEM.

Laryngitis.....	22	1	1	1	1	1	1	1	1	1	1	4
Catarrhal Croup.....	11	1	1	1	1	1	1	1	1	1	1	2
Emphysema, Asthma.....	37	1	1	1	1	1	1	1	1	1	1	2
Bronchitis.....	419	1	1	1	1	1	1	1	1	1	1	32
Pneumonia.....	1058	2	2	2	2	2	2	2	2	2	2	56
Pleurisy.....	33	1	1	1	1	1	1	1	1	1	1	3
Other Diseases of Respiratory System.....	108	1	1	1	1	1	1	1	1	1	1	7

ORDER 5. OF DIGESTIVE SYSTEM.

Stomatitis.....	5	1	1	1	1	1	1	1	1	1	1	1
Dentition.....	8	1	1	1	1	1	1	1	1	1	1	1
Quinsy.....	8	1	1	1	1	1	1	1	1	1	1	1
Dyspepsia.....	29	1	1	1	1	1	1	1	1	1	1	2
Hematemesis.....	7	1	1	1	1	1	1	1	1	1	1	1
Disease of Stomach.....	141	1	1	1	1	1	1	1	1	1	1	10
Ulcer of Stomach.....	23	1	1	1	1	1	1	1	1	1	1	1
Enteritis.....	91	1	1	1	1	1	1	1	1	1	1	4
Appendicitis.....	48	1	1	1	1	1	1	1	1	1	1	1
Ulceration of Intestines.....	5	1	1	1	1	1	1	1	1	1	1	1
Obstruction of Intestines.....	54	1	1	1	1	1	1	1	1	1	1	3
Intussusception of Intestines.....	11	1	1	1	1	1	1	1	1	1	1	2
Hernia.....	29	1	1	1	1	1	1	1	1	1	1	3

TABLE VI—CONTINUED. WINDHAM COUNTY.

CAUSES OF DEATH.	STATE.	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Pomfret.	Putnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.	TOTAL.
Fistula	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pertontitis (not puerperal)	82	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Ascites	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Gallstones	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cirrhosis of Liver	102	—	—	—	—	—	—	—	1	1	3	—	1	2	—	—	8
Hepatitis	28	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Jaundice	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases of Liver	66	—	—	—	—	—	—	1	—	—	—	—	—	2	2	—	5
Other Diseases of Digestive System	73	2	—	1	—	—	—	—	1	2	—	—	—	—	—	—	6
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																	
Addison's Disease	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Disease of Spleen	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of Lymphatic System	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
ORDER 7. OF URINARY SYSTEM.																	
Nephritis	245	—	—	—	—	—	—	—	1	—	2	2	—	—	2	—	6
Bright's Disease	487	1	—	—	—	—	2	—	4	—	6	—	1	2	3	—	19

62	Uremia	1	1	2
3	Suppression of Urine	1	1	2
8	Calculus	1	1	2
70	Disease of Bladder	1	1	2
22	Prostatitis	1	1	2
16	Other Diseases of Urinary System	1	1	2

ORDER 8. OF GENERATIVE SYSTEM.

A. Diseases of the Reproductive Organs.

[illegible]

B. Diseases of Parturition.

Abortion and Miscarriage	21	1	2	1
Puerperal Mania	1	1	1	1
Puerperal Convulsions	23	1	1	1
Puerperal Hemorrhage	6	1	1	2
Placenta Previa	4	1	1	1
Other Accidents of Childbirth	108	3	1	1

ORDER 9. OF ORGANS OF LOCOMOTION.

Caricae, Necrosis	5	1		1	3
Arthritis	1				
Other Diseases of Locomotion	1				
Diseases of Organs of Locomotion	1				

TABLE VI—CONTINUED. WINDHAM COUNTY.

CAUSES OF DEATH.	WINDHAM COUNTY.																STATE.
	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Pomfret.	Putnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.	Total.	
ORDER 10. OF INTEGUMENTARY SYSTEM.																	
Other Diseases of Integumentary System.....	21						1							1		2	
Class VII.—Violence.																	
ORDER 1. ACCIDENT AND NEGLIGENCE.																	
Fractures and Contusions	107	1					2			1					1	5	
Railroad Injuries	130						1	3						3		7	
Gun-Shot Wounds	24						1							1		2	
Burns and Scalds	84		1									1				3	
Poisoned	47																
Drowning	116				1					3						4	
Suffocation	13																
Other Accidents.....	235	2					1	1		1			2	1	1	9	
ORDER 2. HOMICIDE																	
Murder.....	4																

RECAPITULATION OF WINDHAM COUNTY.

CLASSIFIED DISEASES.	STATE.															Total.	
	Brooklyn.	Ashford.	Canterbury.	Chaplin.	Eastford.	Hampton.	Killingly.	Plainfield.	Pomfret.	Putnam.	Scotland.	Sterling.	Thompson.	Windham.	Woodstock.		
All causes	14381	40	19	27	9	11	10	106	94	21	114	11	28	94	175	37	796
Classes.																	
I. Zymotic Diseases	2878	11		5	2	1	5	21	18	1	18		7	23	28	3	143
II. Parasitic Diseases	3																
III. Dietetic Diseases	94																4
IV. Constitutional Diseases	2451	7	2	2	2	1	1	19	21	5	19	5	3	14	27	7	135
V. Developmental Diseases	856	3	3	3	3	1	1	5	7	1	6			7	12	1	50
VI. Local Diseases	6755	15	13	16	5	6	3	49	42	14	66	5	16	47	95	21	413
VII. Violence	850	2	1	1		1		5	4		5		2	2	6	2	31
VIII. Ill-defined and cause not stated	495	2				1		7	2			1		1	4	2	20
Class I—Orders.																	
1. Miasmatic Diseases	1434	7		3	1	1	4	7	8	1	8		3	14	15	3	75
2. Diarrheal Diseases	1180	1		2	1		1	12	8		9		3	9	11		57
3. Malarial Diseases	127	2					2	2	2								6
4. Zoogenous Diseases																	
5. Venereal Diseases	20																
6. Septic Diseases	117	1									1		1		2		5
Class II—Orders.																	
Parasitic Diseases	8																

Class III.—Orders.

Dietetic Diseases

94 ----- 3 1 4

Class IV.—Orders.

Constitutional Diseases

2451 7 2 2 1 1 19 21 5 19 5 3 14 27 7 135

Class V.—Orders.

Developmental Diseases

855 3 3 3 ----- 7 12 1 50

Class VI.—Orders.

1. Diseases of Nervous System

2. Organs of Special Sense

3. Circulatory System

4. Respiratory System

5. Digestive System

6. Lymph. Sys. and Ductless Glands

7. Urinary System

8. Generative System

9. Organs of Locomotion

10. Integumentary System

1833 3 3 8 ----- 3 9 22 9 98
14 -----
1230 3 6 4 3 1 14 10 4 11 ----- 2 7 29 7 102
1688 5 3 2 2 3 ----- 17 9 3 19 1 6 17 1 104
832 2 ----- 2 6 3 6 3 2 8 16 1 50
13 -----
913 2 ----- 2 3 5 ----- 11 1 1 4 7 ----- 36
204 ----- 2 5 ----- 2 2 3 2 16
7 ----- 1 ----- 1 ----- 1 ----- 3
21 ----- 1 ----- 1 ----- 1 ----- 2

Class VII.—Orders.

1. Accident or Negligence

2. Homicide

3. Suicide

4. Execution

755 2 1 1 ----- 5 4 ----- 5 ----- 1 2 6 2 30
4 -----
91 ----- 1 ----- 1 ----- 1 ----- 1

Class VIII.—Orders.

1. Ill defined

2. Cause not stated

460 2 ----- 7 1 ----- 1 ----- 3 2 17
35 ----- 1 ----- 1 ----- 1 ----- 3

[illegible]

TABLE VI—CONTINUED. LITCHFIELD COUNTY.

CAUSES OF DEATH.		STATE.	Litchfield.	Barkhamsted.	Bethlehem.	Bridgewater.	Canaan.	Colebrook.	Cornwall.	Goshen.	Harwinton.	Kent.	Morris.	New Hartford.	New Milford.	Norfolk.	North Canaan.	Plymouth.	Roxbury.	Salisbury.	Sharon.	Thomaston.	Torington.	Warren.	Washington.	Watertown.	Winchester.	Woodbury.	TOTAL.		
Class III.—Dietetic Diseases.																															
Starvation	5																														
Intemperance	9																														
Chronic Alcoholism	66										1					1							1								
Delirium Tremens	8																							2							
Other Dietetic Diseases	6													1																	
Class IV.—Constitutional Diseases.																															
Rheumatism	105													1		1						1		1	1	1					
Gout	1																														
Rickets	6																														
Cancer of Breast	71																	1							1						
Cancer of Stomach	100										1	1													1	1					
Cancer of Womb	90																							2		1	1	1			
Cancer of other Organs	308	5				1			2		1			4			1	1	1					4		1	1	2			
Tabes Mesenterica	4																														
Tubercular Meningitis, Acute Hydroceph.	69																							2							
Phthisis	1451	9	1			2	4	1	2		1		1	5	6	2	2	4	2	9	1	6	13	1	2	8	16	3			

Other forms of Tuberculosis.....	56	1	1	2	1	4
Scrofula.....	13	1	1	1	1	1
Pott's Disease.....	6	1	1	1	1	1
Hip-Joint Disease.....	2	1	1	1	1	1
Purpura.....	7	1	1	1	1	1
Anemia.....	48	1	1	1	1	1
Diabetes.....	112	1	1	1	1	1
Other Constitutional Diseases.....	2	1	1	1	1	1

Class V.—Developmental Diseases.

Premature Birth.....	358	1	1	3	3	1	5	1	27
Atelectasis.....	24	1	1	1	1	1	1	1	1
Cyanosis.....	26	1	1	1	1	1	1	1	1
Spina Bifida.....	7	1	1	1	1	1	1	1	1
Imperforate Anus.....	1	1	1	1	1	1	1	1	1
Other Congenital Malformations.....	48	1	1	1	1	1	1	1	1
Umbilical Hemorrhage.....	9	1	1	1	1	1	1	1	1
Old Age.....	382	1	1	1	1	1	1	1	1

Class VI.—Local Diseases.**ORDER 1. OF NERVOUS SYSTEM.**

Inflammation of Brain or its Membranes.....	273	2	1	1	1	1	1	1	12
Apoplexy.....	773	7	1	1	1	1	1	1	47
Softening of Brain.....	61	1	1	1	1	1	1	1	2
Hydrocephalus, not acute.....	18	1	1	1	1	1	1	1	2
Hemiplegia.....	42	1	1	1	1	1	1	1	5
Paralysis Agitans.....	2	1	1	1	1	1	1	1	1

TABLE VI—CONTINUED. LITCHFIELD COUNTY.

CAUSES OF DEATH.	Litchfield		Barkhamsted.	Bethlehem.	Bridgewater.	Canaan.	Colebrook.	Cornwall.	Goshen.	Harwinton.	Kent.	Morris.	New Hartford.	New Milford.	Norfolk.	North Canaan.	Plymouth.	Roxbury.	Salisbury.	Sharon.	Thomaston.	Torrington.	Warren.	Washington.	Watertown.	Winchester.	Woodbury.	TOTAL.	
	83	2								1												1						4	
Insanity	5																											5	
Chorea	47													1						2	1							5	
Epilepsy	201												1			2			1	1		5				3		16	
Convulsions	7																											1	
Trismus Nascentium	14																											1	
Tetanus	5																											1	
Paraplegia	19																											1	
Diseases of Spinal Cord	2																											1	
Myelitis	28																											1	
Spinal Meningitis	16														1				1							1		3	
Locomotor Ataxia	237	1				1	2			1						1			3		1	2				1	3	17	
Other Diseases of Nervous System																													
ORDER 2. OF ORGANS OF SPECIAL SENSE.																													
Epistaxis	1																												
Otitis	13																												
ORDER 3. OF CIRCULATORY SYSTEM.																													
Endocarditis	109	1											1							1								4	
Valvular Disease of Heart	411	1						1					1	2	1				1	1	1	2				1	1	15	
Disease of Heart	508	1	1	1		2	1	1	2		3	2	4	2	1	2	3	2	1	1	1	1	1	1	2	1	2	36	
Pericarditis	11																												

[illegible]

ORDER 4. OF RESPIRATORY SYSTEM.

[illegible]

ORDER 5. OF DIGESTIVE SYSTEM.

[illegible]

TABLE VI.—CONTINUED. LITCHFIELD COUNTY.

CAUSES OF DEATH.	STATE.	Litchfield.	Barkhamsted.	Bethlehem.	Bridgewater.	Canaan.	Colebrook.	Cornwall.	Goshen.	Harwinton.	Kent.	Morris.	New Hartford.	New Milford.	Norfolk.	North Canaan.	Plymouth.	Roxbury.	Salisbury.	Sharon.	Thomaston.	Torrington.	Warren.	Washington.	Waterdown.	Winchester.	Woodbury.	TOTAL.
Fistula	2																											2
Pertinitis (not puerperal)	82																											82
Ascites	5																											5
Gallstones	7																											7
Cirrhosis of Liver	102																											102
Hepatitis	28																											28
Jaundice	8																											8
Other Diseases of Liver	66																											66
Other Diseases of Digestive System	73																											73
ORDER 6. OF LYMPHATIC SYSTEM AND DUODENAL GLANDS.																												
Addison's Disease	5																											5
Diseases of Spleen	2																											2
Diseases of Lymphatic System	6																											6
ORDER 7. OF URINARY SYSTEM.																												
Nephritis	245																											245
Bright's Disease	487	2	1	1				1	2	2			4	1	1	1	3	3	1	2	1	6	1	5	4	2	1	487

[illegible]

ORDER 8. OF GENERATIVE SYSTEM.

A. Diseases of the Reproductive Organs.

[illegible]

B. Diseases of Parturition.

[illegible]

ORDER 9. OF ORGANS OF LOCOMOTION.

5	Caries, Necrosis	1
1	Arthritis, Perioostitis	1
1	Other Diseases of Locomotion	1

RECAPITULATION OF LITCHFIELD COUNTY.

CLASSIFIED DISEASES.	LITCHFIELD COUNTY.																									STATE.		
	Litchfield.	Barkhamsted.	Bethlehem.	Bridgewater.	Canaan.	Colebrook.	Cornwall.	Goheen.	Harwinton.	Kent.	Morris.	New Hartford.	New Milford.	Norfolk.	North Canaan.	Plymouth.	Roxbury.	Salisbury.	Sharon.	Thomaston.	Torrington.	Warren.	Washington.	Watertown.	Winchester.	Woodbury.	TOTAL.	
All causes	14381	58	13	6	10	25	14	12	12	30	31	6	62	69	26	28	50	11	55	27	39	150	5	34	40	106	21	940
Classes.																												
I. Zymotic Diseases	2878	5	3	2	2	1	1	1	2	11	4	1	17	16	3	6	13	3	18	5	8	37	1	10	9	16	4	199
II. Parasitic Diseases	3	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
III. Dietetic Diseases	94	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
IV. Constitutional Diseases	2451	14	2	---	---	4	4	3	1	3	---	11	6	3	8	2	9	5	9	27	1	6	12	23	6	166		
V. Developmental Diseases	856	---	1	---	---	1	1	1	---	---	---	3	6	2	1	3	2	3	1	3	9	1	2	3	6	2	62	
VI. Local Diseases	6755	34	7	2	7	16	7	5	15	19	5	29	28	16	14	20	4	20	13	11	64	1	14	14	55	8	434	
VII. Violence	850	3	---	1	1	2	1	1	1	3	---	2	10	---	2	4	---	3	3	5	8	1	1	---	5	1	58	
VIII. Ill-defined and cause not stated	495	2	---	1	---	1	---	---	---	2	---	2	1	2	2	---	2	---	---	1	3	---	1	2	1	2	25	
Class I.—Orders.																												
1. Miasmatic Diseases	1434	5	2	1	2	1	1	1	6	4	1	8	11	---	1	8	1	15	3	7	13	1	7	3	10	4	117	
2. Diarrhoeal Diseases	1180	---	1	1	---	---	---	1	4	---	---	9	4	2	3	5	1	3	2	1	23	---	3	6	---	75		
3. Malarial Diseases	127	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	
4. Zoogenous Diseases	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
5. Venereal Diseases	20	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	
6. Septic Diseases	117	---	---	---	---	---	---	---	1	---	---	1	---	---	2	---	---	---	---	---	1	---	---	---	---	---	5	
Class II.—Orders.																												
Parasitic Diseases	8	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	

Class III.—Orders.														
Dietetic Diseases	94	---	---	---	---	---	---	---	1	---	1	1	---	6
Class IV.—Orders.														
Constitutional Diseases.....	2451	14	2	---	---	4	4	3	1	3	11	6	3	166
Class V.—Orders.														
Developmental Diseases	855	---	1	---	---	1	1	1	---	---	3	6	2	52
Class VI.—Orders.														
1. Diseases of Nervous System	1833	10	4	---	3	4	2	3	1	6	4	2	4	114
2. Organs of Special Sense	14	---	---	---	---	---	---	---	---	---	---	---	---	---
3. Circulatory System	1230	5	1	1	2	4	2	1	2	1	5	1	4	71
4. Respiratory System	1688	11	1	---	2	3	2	1	2	3	1	10	5	106
5. Digestive System	832	2	---	---	2	2	1	1	2	3	6	3	2	54
6. Lymph. Sys. and Ductless Glands	13	---	---	---	---	---	---	---	---	---	---	---	---	---
7. Urinary System	913	5	1	1	1	1	1	1	2	3	1	5	1	71
8. Generative System	204	1	---	---	2	2	1	1	1	1	---	---	---	17
9. Organs of Locomotion	7	---	---	---	---	---	---	---	---	---	---	---	---	1
10. Integumentary System	21	---	---	---	---	---	---	---	---	---	---	---	---	1
Class VII.—Orders.														
1. Accident or Negligence	155	3	---	1	1	2	1	1	1	2	1	8	2	50
2. Homicide	4	---	---	---	---	---	---	---	---	---	---	---	---	---
3. Suicide	91	---	---	---	---	---	---	---	---	---	---	---	---	8
4. Execution	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Class VIII.—Orders.														
1. Ill defined.....	460	2	---	1	---	1	---	---	---	2	---	1	2	23
2. Cause not stated	35	---	---	---	---	---	---	---	---	---	---	---	---	2

TABLE VI.—Continued.
MIDDLESEX COUNTY.

CAUSES OF DEATH.	STATE.	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Essex.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.	TOTAL.
Class I.—Zymotic Diseases.																	
ORDER 1. MIASMATIC.																	
Measles	46	—	—	—	—	1	—	—	1	1	—	—	—	—	—	1	4
Scarlet Fever	50	1	—	—	—	1	—	—	—	—	—	—	—	—	1	—	6
Influenza	660	10	4	2	3	1	1	—	5	2	—	1	1	2	3	—	35
Typhoid Fever	186	3	—	—	—	—	—	—	1	1	—	—	—	—	—	—	5
Cerebro-Spinal Fever	90	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever	23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	139	2	—	—	—	—	—	—	1	—	—	1	—	6	—	—	10
Diphtheria	173	2	—	—	—	—	—	—	—	—	—	—	—	—	3	—	6
Membranous Croup	64	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Other Miasmatic Diseases	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE VI—CONTINUED. MIDDLESEX COUNTY.

CAUSES OF DEATH.	MIDDLESEX COUNTY.															STATE.
	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Essex.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.	
Class III.—Dietetic Diseases.																
Starvation	5															
Intemperance	9															
Chronic Alcoholism	66	2			1	1		2	1							7
Delirium Tremens	8	1														1
Other Dietetic Diseases	6															
Class IV.—Constitutional Diseases.																
Rheumatism	105	1	1					1	1							4
Gout	1															
Rickets	6															
Cancer of Breast	71	5						1						1		6
Cancer of Stomach	100	1														2
Cancer of Womb	90	2		2				1		1			1		7	7
Cancer of other Organs	308	3	2					3				1		3		13
Tabes Mesenterica	4															
Tubercular Meningitis, Acute Hydroceph.	69	1														2
Phthisis	1451	40	1	2	1	4	1	1	3		4	1	8	3	1	69
Total.																

[illegible]

Class VL—Local Diseases.

ORDER 1. OF NERVOUS SYSTEM.

[illegible]

TABLE VI.—CONTINUED. MIDDLESEX COUNTY.

CAUSES OF DEATH.	MIDDLESEX COUNTY.																
	STATE.	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Rose.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.	TOTAL.
Insanity.....	83	13	1	1	1	1	1	1	1	1	1	1	3	1	1	1	19
Chorea.....	5	2															2
Epilepsy.....	47	10															10
Convulsions.....	201		1	1	1	1	1	1	1	1	1	1	1	1	1	1	6
Trismus Nascentium.....	7																
Tetanus.....	14																
Paraplegia.....	5																
Diseases of Spinal Cord.....	19		1	1	1	1	1	1	1	1	1	1	1	1	1	1	2
Myelitis.....	2																
Spinal Meningitis.....	28					1	1		1	1							3
Locomotor Ataxia.....	16																
Other Diseases of Nervous System.....	237	20	1	1	1	1	1	1	2	1	1	1	1	4	1	1	31
ORDER 2. OF ORGANS OF SPECIAL SENSE.																	
Epistaxis.....	1																1
Otitis.....	13	1															
ORDER 3. OF CIRCULATORY SYSTEM.																	
Endocarditis.....	109				1									3	2	1	7
Valvular Disease of Heart.....	411	19			1				1	1	1	1			1		24
Disease of Heart.....	608	12	3	6	1	2			2	1	1	1		3		1	82
Pericarditis.....	11																1

[illegible]

ORDER 4: OF RESPIRATORY SYSTEM.

Laryngitis	22	---	---	---	1	1
Croup	11	---	---	---	---	---
Empysema, Asthma	37	---	---	---	---	---
Bronchitis	419	6	1	1	---	9
Pneumonia	1058	29	6	1	1	47
Pleurisy	33	2	---	---	---	1
Other Diseases of Respiratory System	108	4	---	---	---	6

ORDER 5. OF DIGESTIVE SYSTEM.

[illegible]

TABLE VI—CONTINUED. MIDDLESEX COUNTY.

CAUSES OF DEATH.	MIDDLESEX COUNTY.													TOTAL.			
	STATE.	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Rose.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.	
Fistula	2																
Peritonitis (not puerperal)	82	4		2										1			
Ascites	5																
Gallstones	7																
Cirrhosis of Liver	102	4															
Hepatitis	28																
Jaundice	8																
Other Diseases of Liver	66	1				1			1			1					4
Other Diseases of Digestive System	73	1															1
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																	
Addison's Disease	5																
Disease of Spleen	2																
Diseases of Lymphatic System	6					1											1
ORDER 7. OF URINARY SYSTEM.																	
Nephritis	245	4															2
Bright's Disease	487	9				3	2	1	1	1	1	8	3	1	3	2	24

[illegible]

ORDER 8. OF GENERATIVE SYSTEM.

A. Diseases of the Reproductive Organs.

Diseases of the Uterus
 Metritis
 Disease of Ovaries
 Disorders of Menstruation
 Pelvic Abscess
 Diseases of Testis, Penis, Scrotum, etc.

B. Diseases of Parturition.

Abortion and Miscarriage.....
 Puerperal Mania.....
 Puerperal Convulsions.....
 Puerperal Hemorrhage.....
 Placenta Previa.....
 Other Accidents of Childbirth.....

ORDER 9. OF ORGANS OF LOCOMOTION.

Caries, Necrosis -----
Arthritis, Periostitis -----
Other Diseases of Organs of Locomotion -----

TABLE VI.—CONTINUED. MIDDLESEX COUNTY.

CAUSES OF DEATH.	MIDDLESEX COUNTY.																	TOTAL.
	STATE.	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Essex.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.		
ORDER 10. OF INTEGRUMENTARY SYSTEM.	21	1																1
Other Diseases of Integrumentary System.....																		
Class VII.—Violence.																		
ORDER 1. ACCIDENT AND NEGLIGENCE.																		
Fractures and Contusions.....	107	1					1						2	1		1		3
Railroad Injuries.....	130	2					1											6
Gun-Shot Wounds.....	24								1						1			2
Burns and Scalds.....	84					1									1			2
Poisoned.....	47																	
Drowning.....	115	2	1		1													4
Suffocation.....	13	4																4
Other Accidents.....	235	3	1			1			4	1								10
ORDER 2. HOMICIDE.																		
Murder.....	4																	

RECAPITULATION OF MIDDLESEX COUNTY.

CLASSIFIED DISEASES.	STATE.																TOTAL.
	Middletown.	Haddam.	Chatham.	Chester.	Clinton.	Cromwell.	Durham.	East Haddam.	Essex.	Killingworth.	Middlefield.	Old Saybrook.	Portland.	Saybrook.	Westbrook.		
All causes	14381	348	32	27	22	30	22	11	53	33	3	20	17	64	31	22	735
Classes.																	
I. Zymotic Diseases.....	2878	36	7	2	5	6	2	1	13	10	—	2	3	16	7	2	112
II. Parasitic Diseases.....	3	—	—	—	—	—	1	—	2	1	—	—	—	—	—	—	8
III. Dietetic Diseases.....	94	3	—	—	—	—	1	—	2	1	—	—	—	—	—	—	8
IV. Constitutional Diseases.....	2451	55	2	5	4	1	5	1	7	5	1	4	3	11	8	2	114
V. Developmental Diseases.....	855	11	4	4	3	6	1	3	5	2	—	2	2	5	—	2	50
VI. Local Diseases.....	6755	221	16	16	8	14	9	6	19	11	2	10	6	27	13	16	393
VII. Violence.....	850	13	2	—	1	2	2	—	5	1	—	1	2	1	2	1	33
VIII. Ill-defined and cause not stated.....	495	9	1	—	1	—	2	—	2	3	—	1	1	4	1	—	25
Class I.—Orders.																	
1. Miasmatic Diseases.....	1434	18	4	2	3	3	1	—	8	4	—	2	1	12	7	1	66
2. Diarrhoeal Diseases.....	1180	15	3	—	1	3	—	1	3	6	—	—	—	3	—	1	36
3. Malarial Diseases.....	127	1	—	—	—	—	—	—	2	—	—	2	—	—	—	—	6
4. Zoonogenic Diseases.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Venereal Diseases.....	20	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
6. Septic Diseases.....	117	1	—	—	1	—	—	—	—	—	—	—	—	1	—	—	3
Parasitic Diseases.....	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Class II.—Orders.																	
Parasitic Diseases.....	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Class III.—Orders.

Dietetic Diseases

94 3 1 1 2 1 8

Class IV.—Orders.

Constitutional Diseases

2451 55 2 5 4 1 5 1 7 5 1 4 3 11 8 2 114

Class V.—Orders.

Developmental Diseases

855 11 4 4 3 6 1 3 5 2 2 50

Class VI.—Orders.

1. Diseases of Nervous System

1833 83 4 5 1 2 4 4 8 5 1 3 8 2 8 138

2. Organs of Special Sense

14 1 3 8 2 8 138

3. Circulatory System

1230 34 4 6 3 2 2 2 5 4 1 7 5 5 81

4. Respiratory System

1688 41 7 1 2 1 1 2 1 6 1 65

5. Digestive System

832 37 4 1 2 3 1 51

6. Lymph. Sys. and Ductless Glands

13 1 3 2 3 3 2 48

7. Urinary System

913 21 1 1 2 6 2 1 1 1 2 1 7

8. Generative System

204 3 2 1 1

9. Organs of Locomotion

7 1 1 1

10. Integumentary System

21 1 1 1

Class VII.—Orders.

1. Accident or Negligence

755 12 2 1 2 2 2 1 2 1 31

2. Homicide

4 4 1 2

3. Suicide

91 1 1 1 2

4. Execution

..... 1 1

Class VIII.—Orders.

1. Ill defined

460 9 1 1 2 2 1 4 1 23

2. Cause not stated

35 1 1 1 2

TABLE VI—Continued.
TOLLAND COUNTY.

CAUSES OF DEATH.	STATE.	Tolland.	Andover.	Bolton.	Columbia.	Coventry.	Killington.	Hebron.	Mansfield.	Somers.	Stafford.	Union.	Vernon.	Willington.	TOTAL.
Class I.—Zymotic Diseases.															
ORDER 1. MIASMATIC.															
Measles.....	46														1
Scarlet Fever.....	50	1													1
Influenza.....	660	2	1		1	3	2	5	4	2	3		1	2	32
Typhoid Fever.....	186							1	2		2				3
Cerebro-Spinal Fever.....	90								2		1		1		3
Continued Fever.....	23														1
Whooping Cough.....	139					2					2				2
Diphtheria.....	173														2
Membranous Croup.....	64						1		1		1		2		3
Other Miasmatic Diseases.....	3														1

ORDER 2. DIARRHEAL.											
Cholera Infantum.....	523	1		1	2		1	1	1	2	3
Infantile Diarrhoea.....	425						2	2	1	2	7
Cholera Morbus.....	25	1									1
Dysentery.....	161	1							1		1
Diarrhoea.....	46		1				1				2
ORDER 3. MALARIAL.											
Intermittent Fever.....	13										
Remittent Fever.....	19										
Remittent or Congestive Fever.....	15									1	
Other Malarial Diseases.....	80										1
ORDER 4. ZOOGENOUS.											
ORDER 5. VENEREAL.											
Syphilis.....	19										
Gonorrhoea, Stricture of Urethra.....	1										
ORDER 6. SEPTIC.											
Erysipelas.....	32									1	1
Pyæmia, Septicæmia.....	49								1		1
Puerperal Fever.....	36										
Class II.—Parasitic Diseases.											
Thrush.....	2										
Other Parasitic Diseases.....	1										

TABLE VI—CONTINUED. TOLLAND COUNTY.

CAUSES OF DEATH.	TOLLAND COUNTY.														STATE
	Andover.	Bolton.	Columbia.	Coveauty.	Killington.	Hebron.	Mansfield.	Somern.	Stafford.	Union.	Vernon.	Willington.	Total.		
Class III.—Dietetic Diseases.															
Starvation															
Intemperance	9														
Chronic Alcoholism	66														
Delirium Tremens	8														
Other Dietetic Diseases	6														
Class IV.—Constitutional Diseases.															
Rheumatism	105														
Gout	1														
Rickets	6														
Cancer of Breast	71	1							1				2		
Cancer of Stomach	100		1					1			4		6		
Cancer of Womb	90				1							1	1		
Cancer of other Organs	308							2			1		4		
Tabes Mesenterica	4														
Tubercular Meningitis, Acute Hydroceph.	69	1		1			4	3	3	1			1		
Phthisis	1451				1						17		36		

Other forms of Tuberculosis	56					1	
Scrofula	13						
Pott's Disease	6						
Hip-Joint Disease	2						
Purpura	7						
Anemia	48						
Diabetes	113	1					1
Other Constitutional Diseases	2						3

Class V.—Developmental Diseases.

Premature Birth	358	1	1	2	3
Atelectasis	24				
Cyanosis	26				
Spina Bifida	7				
Imperforate Anus	1				
Other Congenital Malformations	48	1	1	4	13
Umbilical Hemorrhage	9				
Old Age	333	1	1	3	3

Class VI.—Local Diseases.

ORDER 1. OF NERVOUS SYSTEM.

[illegible]

TABLE VI—CONTINUED. TOLLAND COUNTY.

CAUSES OF DEATH.	STATE.	Tolland.	Andover.	Bolton.	Columbia.	Covey.	Ellington.	Hebron.	Mansfield.	Somers.	Stafford.	Union.	Vernon.	Willington.	TOTAL.
Insanity	83												2		2
Chorea	5														
Epilepsy	47												1		1
Convulsions	201												1		1
Trismus Nascentium	7														
Tetanus	14												1		1
Paraplegia	5														
Diseases of Spinal Cord	19												1		1
Myelitis	2														
Spinal Meningitis	28														
Locomotor Ataxia	16					1									1
Other Diseases of Nervous System	237														
ORDER 2. OF ORGANS OF SPECIAL SENSE.															
Epistaxis	1														
Otitis	13														
ORDER 3. OF CIRCULATORY SYSTEM.															
Endocarditis	109									2	1				3
Valvular Disease of Heart	411	1	1		1		1	1	3				4	1	13
Disease of Heart	508			1			1	2	3	2	2	1	4	2	18
Pericarditis	11														

TABLE VI—CONTINUED. TOLLAND COUNTY.

CAUSES OF DEATH.	STATE.	Tolland.	Andover.	Bolton.	Columbia.	Coventry.	Killington.	Hebron.	Mansfield.	Somers.	Stafford.	Union.	Vernon.	Willington.	TOTAL.
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.															
Fistula.....	2														
Peritonitis (not puerperal).....	82														
Ascites.....	6														
Gallstones.....	7														
Cirrhoosis of Liver.....	102								2	2			2		6
Hepatitis.....	28					2									2
Jaundice.....	8														
Other Diseases of Liver.....	66					2			2	1	1		1		7
Other Diseases of Digestive System.....	73					1	1				1		1		4
ORDER 7. OF URINARY SYSTEM.															
Nephritis.....	245														
Bright's Disease.....	481				1				1	1	2		8	1	16
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.															
Addison's Disease.....	5														
Disease of Spleen.....	2					1									1
Diseases of Lymphatic System.....	6														

Uremia.....	62					1			1				3
Suppression of Urine.....	3												
Calculus.....	8												
Disease of Bladder.....	70					1							1
Prostatitis.....	23												
Other Diseases of Urinary System.....	16					1			1				2
ORDER 3. OF GENERATIVE SYSTEM.													
A. Diseases of the Reproductive Organs.													
Diseases of the Uterus.....	20												2
Metritis.....	6								2				
Disease of Ovaries.....	8												
Disorders of Menstruation.....	3												
Pelvic Abscess.....	3								1				1
Diseases of Testis, Penis, Scrotum, etc.	1												
B. Diseases of Parturition.													
Abortion and Miscarriage.....	21												
Puerperal Mania.....	1												
Puerperal Convulsions.....	23												
Puerperal Hemorrhage.....	6												
Placenta Previa.....	4					1							1
Other Accidents of Childbirth.....	108							1			2	1	4
ORDER 9. OF ORGANS OF LOCOMOTION.													
Caries, Necrosis.....	5												
Arthritis, Periostitis.....	1								1				1
Other Diseases of Organs of Locomotion.....	1												

TABLE VI—CONTINUED. TOLLAND COUNTY.

CAUSES OF DEATH.	STATE	Tolland.	Andover.	Bolton.	Columbia.	Coventry.	Ellington.	Hebron.	Mansfield.	Somers.	Stafford.	Union.	Vernon.	Willington.	TOTAL.
ORDER 10. OF INTEGRUMENTARY SYSTEM.	21														
Other Diseases of Integrumentary System.....															
Class VII.—Violence.															
ORDER 1. ACCIDENT AND NEGLIGENCE.															
Fractures and Contusions.....	107					1	1				2		3		7
Railroad Injuries.....	130				1								1		2
Gun-Shot Wounds.....	24											1			1
Burns and Scalds.....	84												1		1
Poisoned.....	47														
Drowning.....	115						1								1
Suffocation.....	13														
Other Accidents.....	235					1	1							1	3
ORDER 2. HOMICIDE.															
Murder.....	4														

RECAPITULATION OF TOLLAND COUNTY.

CLASSIFIED DISEASES.	STATE.	Tolland.	Andover.	Bolton.	Columbia.	Coventry.	Killington.	Hebron.	Mansfield.	Somerset.	Stafford.	Union.	Vernon.	Willington.	TOTAL.
All causes.....	14381	13	7	2	9	30	25	26	32	29	58	9	125	13	378
Classes.															
I. Zymotic Diseases.....	2878	5	3		2	7	4	9	10	5	15	4	26	3	93
II. Parasitic Diseases.....	3														
III. Dietetic Diseases.....	94														
IV. Constitutional Diseases.....	2451	3	1	1	1	1	2	5	4	6	5	1	22	2	54
V. Developmental Diseases.....	855	1			2	1	1	3	1	7	7	1	6	21	21
VI. Local Diseases.....	6755	3	3	1	3	18	14	8	18	18	27	1	59	7	180
VII. Violence.....	850	1			1	2	3				3	1	6	1	18
VIII. Ill-defined and cause not stated.....	495					1	1	1	1		1	2	6		12
Class I.—Orders.															
1. Miasmatic Diseases.....	1434	3	1		1	5	3	6	7	2	9	4	12	2	55
2. Diarrhoeal Diseases.....	1180	2	2		1	2	1	3	3	3	4		13	1	35
3. Malarial Diseases.....	127										1				1
4. Zoonogenous Diseases.....															
5. Venereal Diseases.....	20														
6. Septic Diseases.....	117										1		1		2
Class II.—Orders.															
Parasitic Diseases.....	3														

Class III.—Orders.

Dietetic Diseases

94

Class IV.—Orders.

Constitutional Diseases

2451 3 1 1 1 2 5 4 6 5 1 22 2 54

Class V.—Orders.

Developmental Diseases

855 1 2 1 1 3 7 6 21

Class VI.—Orders.

1. Diseases of Nervous System

1833 1 4 2 1 2 3 6 18 37

2. Organs of Special Sense

14

3. Circulatory System

1230 2 1 1 1 3 3 7 4 3 1 12 3 42

4. Respiratory System

1688 6 3 1 4 4 7 13 1 39

5. Digestive System

832 1 6 3 1 3 4 4 6 1 30

6. Lymph. Sys. and Ductless Glands

13 1 1 1 1

7. Urinary System

913 1 2 2 2 3 3 8 1 22

8. Generative System

204 1 1 3 2 1 8

9. Organs of Locomotion

7 1 1 1 1

10. Integumentary System

21

Class VII.—Orders.

1. Accident or Negligence

755 1 2 3 2 1 5 1 15

2. Homicide

4

3. Suicide

91 1 1 1 3

4. Execution

.....

Class VIII.—Orders.

1. Ill defined

460 1 1 1 1 1 4 9

2. Cause not stated

35 1 1 2 3

RECAPITULATION OF TABLE VI.

CLASSIFIED DISEASES.	RECAPITULATION OF TABLE VI.								Total Mortality.	Total, 1898.
	STATE.	Hartford Co.	New Haven Co.	New London Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	
All causes.....	14381	3217	4153	1270	2892	796	940	735	378	14170
Classes.										
I. Zymotic Diseases.....	2878	723	840	215	553	143	199	112	93	2768
II. Parasitic Diseases.....	3	1	2	7	15	4	6	8	---	2
III. Dietetic Diseases.....	94	21	33	207	626	135	166	114	54	89
IV. Constitutional Diseases.....	2451	519	730	207	626	135	166	114	54	2394
V. Developmental Diseases.....	855	224	247	76	135	50	52	50	21	825
VI. Local Diseases.....	6755	1409	1925	629	1372	413	434	393	180	6907
VII. Violence.....	850	193	236	86	195	31	58	33	18	736
VIII. Ill-defined and cause not stated.....	495	127	140	50	96	20	25	25	12	649
Class I.—Orders.										
1. Miasmatic Diseases.....	1434	403	346	103	269	75	117	66	55	1140
2. Diarrhoeal Diseases.....	1180	255	395	96	231	57	75	36	35	1393
3. Malarial Diseases.....	127	24	54	6	29	6	1	6	1	124
4. Zoonous Diseases.....	---	---	---	---	---	---	---	---	---	---
5. Venereal Diseases.....	20	8	5	1	5	---	1	1	---	1
6. Septic Diseases.....	117	33	40	10	19	5	5	3	2	200
Class II.—Orders.										
Parasitic Diseases.....	3	1	2	---	---	---	---	---	---	2

Class III.—Orders.

Dietetic Diseases.....

Class IV.—Orders.

Constitutional Diseases.....

Class V.—Orders.

Developmental Diseases.....

Class VI.—Orders.

1. Diseases of Nervous System.....	1833	375	527	168	376	98	114	138	97	12.73	1851
Organs of Special Sense.....	14	1	4	1	5	2	---	---	---	.09	18
2. Circulatory System.....	1230	225	339	129	241	102	71	81	42	8.56	1216
3. Respiratory System.....	1688	405	499	147	324	104	105	65	39	11.72	1721
4. Digestive System.....	832	168	239	70	170	50	54	51	30	5.78	912
5. Lymph. Sys. and Ductless Glands.....	13	2	4	1	4	---	---	---	1	.09	17
6. Urinary System.....	913	200	231	100	205	36	71	48	22	6.34	889
7. Generative System.....	204	31	74	10	41	16	17	7	8	1.41	166
8. Organs of Locomotion.....	7	---	2	---	---	3	1	---	1	.04	---
9. Integumentary System.....	21	2	6	3	6	2	1	1	---	.14	17

Class VII.—Orders.

1. Accident or Negligence.....	755	177	201	79	172	30	50	31	15	5.24	648
2. Homicide.....	4	1	2	---	1	---	---	---	---	.02	5
3. Suicide.....	91	15	33	7	22	1	8	2	3	.63	82
4. Execution.....	---	---	---	---	---	---	---	---	---	---	1

Class VIII.—Orders.

1. Ill defined.....	460	114	135	47	92	17	23	23	9	3.19	494
2. Cause not stated.....	36	13	5	3	4	3	2	2	3	.24	55

TABLE VII.

NOSOLOGICAL ARRANGEMENT BY COUNTIES, WITH COMPARATIVE MORTALITY FOR TEN YEARS.

NOTE.—Some of the blank spaces in the following table are due to different methods of tabulating diseases in the previous reports; for example, some reports call all cases of Diarrhoea in children Cholera Infantum, others call them Infantile Diarrhoea. Again, in some reports Cholera Morbus is included with Diarrhoea, in others they are separately counted.

CAUSES OF DEATH.	COUNTIES										Per cent to Total Mortality.	1889, Total.	1888, Total.	1897, Total.	1896, Total.	1895, Total.	1894, Total.	1893, Total.	1892, Total.	1891, Total.	1890, Total.	Aggregate for Ten Years.	Average for Ten Years.			
	Hartford Co.	New Haven Co.	New London Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	1889, Total.	1888, Total.														1897, Total.	1896, Total.	1895, Total.	1894, Total.	1893, Total.	1892, Total.	1891, Total.	1890, Total.	Aggregate for Ten Years.	Average for Ten Years.
Class I.—Zymotic Diseases.																										
ORDER 1.—MIASMATIC.																										
Small Pox.....																								34	3.4	
Varioloid.....																								5	.5	
Chicken Pox.....																								9	.9	
Measles.....	26	3		9	2	1	4	1	46	30	80	52	259	26	30	69	49	115	18		744	7.44		6	.6	
Scarlet Fever.....	5	9	6	16	2	4	6	2	50	34	38	69	82	65	64	217	280	149	67		1081	108.1		5	.5	
Typhus Fever.....																								6	.6	
Relapsing Fever.....																								5	.5	
Influenza.....	146	172	54	101	46	74	35	32	660	4.58	290	161	118	275	214	252	564	366	185		8085	308.5		34	3.4	
Typhoid Fever.....	57	61	15	25	6	14	5	3	186	1.28	189	151	207	269	250	275	309	301	312		2439	243.9		5	.5	
Cerebro-Spinal Fever.....	25	16	4	31	6	5		3	90	62	68	41	45	41	64	124	46	45	22		586	58.6		9	.9	
Continued Fever.....																								1	.1	
Whooping Cough.....	41	24	4	45	5	6	10	1	23	16	18	2	7	25	22	33	22	29	17		198	19.8		1	.1	
Diphtheria.....	84	32	11	26	5	8	5	2	173	1.20	219	310	53	375	293	206	264	369	410	435		3023	302.3		1	.1
Membranous Group.....	19	15	7	8	3	4	1	7	64	44	64	106	124	126	162	203	178	156	122		1300	130.0		12	1.2	
Mumps.....																								1	.1	
Other Miasmatic Diseases.....				3					3	.02		2	3	7	14	8	14	13	10		112	11.2		12	1.2	

ORDER 2. DIARRHEAL.																					
Cholera Infantum.....	101	164	45	114	26	41	20	12	523	3.63	723	496	680	660	701	765	783	695	660	6686	668.6
Infantile Diarrhoea.....	98	141	25	88	21	22	12	15	425	2.95	366	313	250	229	242	207	185	272	219	2708	270.8
Cholera Morbus.....	5	8	4	5	---	1	1	1	25	.17	24	19	32	40	40	24	55	53	29	341	34.1
Dysentery.....	40	65	16	18	7	10	2	3	161	1.11	204	118	156	177	185	119	105	101	98	1424	142.4
Diarrhoea.....	11	14	6	6	3	1	1	4	46	.31	66	49	121	146	101	129	115	50	84	907	90.7
ORDER 3. MALARIAL.																					
Intermittent Fever.....	3	6	---	4	---	---	---	---	13	.09	11	17	18	24	16	25	22	13	7	166	16.6
Remittent Fever.....	7	7	1	3	---	1	---	---	19	.13	18	27	28	10	26	24	29	26	16	223	22.3
Pernicious or Congestive Fever.....	2	4	---	4	2	---	3	---	15	.10	13	16	11	13	6	12	12	20	9	127	12.7
Other Malarial Diseases.....	12	37	5	18	4	---	3	1	80	.55	82	67	113	69	55	43	36	30	47	622	62.2
ORDER 4. ZOOGENOUS.																					
Hydrophobia.....	---	---	---	---	---	---	---	---	---	---	---	---	1	2	---	2	1	2	1	9	.9
Glanders.....	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	---	---	---	1	.1
Cow Pox and effects of Vaccination.....	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	---	---	---	---	1	.1
Other Zoogenous Diseases.....	---	---	---	---	---	---	---	---	---	---	1	---	---	---	1	---	---	1	---	3	.3
ORDER 5. VENEREAL.																					
Syphilis.....	8	4	---	5	---	1	1	---	19	.13	20	22	18	20	16	14	15	15	10	169	16.9
Gonorrhoea, Stricture of Urethra.....	---	1	---	---	---	---	---	---	1	---	---	2	---	4	4	6	3	2	1	23	2.3
ORDER 6. SEPTIC.																					
Phagedena.....	---	---	---	---	---	---	---	---	---	---	---	---	1	---	---	---	---	---	1	2	.2
Erysipelas.....	4	15	2	6	1	1	2	1	32	.22	28	41	48	36	29	59	62	47	45	427	42.7
Pyæmia, Septicæmia.....	19	12	5	7	1	3	1	1	49	.34	38	33	56	51	57	38	54	54	39	469	46.9
Puerperal Fever.....	10	13	3	6	3	1	---	---	36	.25	34	44	36	43	43	57	78	49	50	470	47.0
Class II.—Parasitic Diseases.																					
Thrush.....	1	1	---	---	---	---	---	---	2	.01	1	---	1	3	---	1	1	2	---	11	1.1
Worms.....	---	---	---	---	---	---	---	---	---	---	---	2	---	---	2	---	2	---	---	6	.6
Other Parasitic Diseases.....	1	---	---	---	---	---	---	---	1	---	1	---	2	---	---	---	2	---	---	6	.6

TABLE VII.—CONTINUED.

CAUSES OF DEATH.	Per cent to Total Mortality										Aggregate for Ten Years.		Average for Ten Years.								
	Hartford Co.	New Haven Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	1889, Total.	1898, Total.	1897, Total.	1896, Total.	1896, Total.	1894, Total.	1893, Total.	1892, Total.	1891, Total.	1890, Total.	Aggregate for Ten Years.	Average for Ten Years.		
Class III.—Dietetic Diseases.																					
Starvation	—	—	—	—	—	—	—	5	.03	1	3	5	4	4	3	2	1	2	30	3.0	
Scurvy	—	4	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	.1	
Intemperance	—	5	—	2	2	—	—	9	.06	14	23	24	10	13	18	12	13	14	150	15.0	
Chronic Alcoholism	17	19	5	13	2	3	7	66	.45	64	27	41	32	47	55	60	56	475	47.5		
Delirium Tremens	3	2	1	1	—	1	—	8	.05	7	13	1	3	2	1	5	9	2	51	5.1	
Other Dietetic Diseases	1	3	1	—	1	—	—	6	.04	3	1	—	4	4	2	4	4	3	32	3.2	
Class IV.—Constitutional Dis.																					
Rheumatism	19	35	12	23	5	7	4	105	.73	93	87	107	91	94	121	124	107	109	1038	103.8	
Gout	1	—	—	—	—	—	—	1	—	1	2	3	2	4	1	1	1	—	16	1.6	
Rickets	1	3	—	—	2	—	—	6	.04	6	5	6	9	2	4	2	4	—	44	4.4	
Cancer of Breast	11	22	9	17	2	2	6	71	.49	58	58	43	62	57	26	52	59	45	531	53.1	
Cancer of Stomach	14	32	11	22	6	7	2	6	100	.69	107	96	90	107	83	82	70	80	980	98.0	
Cancer of Womb	16	24	7	26	5	4	7	1	90	.62	80	24	49	73	34	82	59	56	585	58.5	
Cancer of other Organs	74	83	26	67	17	24	13	4	308	2.14	272	336	276	229	242	205	189	221	213	2491	249.1
Tabes Mesenterica	1	1	—	—	1	—	—	4	.02	7	57	119	117	82	87	75	85	63	696	69.6	
Tubercular Mening., Acute Hydro.	10	28	7	13	4	4	2	1	69	.47	88	91	96	84	106	121	94	100	92	941	94.1
Phthisis	324	437	112	299	76	98	69	36	1451	10.08	1438	1306	1227	1358	1311	1406	1386	1402	1544	13828	1382.8

Other forms of Tuberculosis.....	13	10	5	19	4	4	1	56	31	59	142	181	151	126	98	91	87	60	1051	105.1
Scrofula.....	1	7	1	1	2	1	---	13	.09	11	20	18	11	10	16	31	25	35	190	19.0
Pott's Disease.....	2	---	4	---	---	---	---	6	.04	2	1	2	8	6	7	9	2	2	44	4.4
Hip-Joint Disease.....	1	---	---	---	---	---	---	2	.01	4	2	3	4	7	8	3	7	5	45	4.5
Purpura.....	3	1	---	1	1	1	---	7	.04	10	6	2	6	5	5	3	7	10	61	6.1
Anæmia.....	10	12	3	7	5	2	---	48	.33	39	34	40	49	40	35	32	42	31	390	39.0
Diabetes.....	24	30	12	27	5	4	7	112	.77	116	87	86	71	77	59	58	79	62	806	80.6
Other Constitutional Diseases.....	1	---	---	---	---	---	1	2	.01	4	3	6	3	2	5	1	2	5	33	3.3

Class V.—Developmental Dis.

Premature Birth.....	86	112	30	61	24	27	11	7	358	2.48	357	304	350	285	277	238	252	231	200	2852	285.2
Atelectasis.....	15	3	4	1	1	---	---	24	.16	17	17	17	17	23	14	12	17	14	11	166	16.6
Cyanosis.....	9	5	1	6	2	3	---	26	.17	37	23	20	25	23	18	11	17	20	220	22.0	
Spina Bifida.....	3	3	1	---	---	---	---	7	.04	8	14	14	16	9	9	6	11	9	103	10.3	
Imperforate Anus.....	1	---	---	---	---	---	---	1	---	---	1	2	1	1	1	1	3	1	12	1.2	
Cleft Palate, Hare Lip.....	---	---	---	---	---	---	---	---	---	3	---	---	1	5	1	---	3	---	13	1.3	
Other Congenital Malformations.....	9	15	5	6	3	4	5	1	48	.33	39	46	25	27	16	22	20	17	14	274	27.4
Umbilical Hemorrhage.....	9	---	---	---	---	---	---	9	.06	11	8	7	11	10	10	5	10	4	85	8.5	
Old Age.....	117	88	36	57	20	17	34	13	352	2.03	353	467	504	546	489	561	643	677	638	5260	526.0

Class VI.—Local Diseases.**ORDER 1. OF NERVOUS SYSTEM.**

Inflam. of Brain or its Membranes.....	60	94	26	59	17	12	2	3	273	1.89	272	298	356	303	323	339	307	328	327	3176	317.6
Apoplexy.....	166	221	66	161	33	47	58	21	773	5.37	739	744	683	689	583	631	607	588	542	6579	657.9
Softening of Brain.....	15	16	6	9	7	2	3	3	61	.42	49	92	97	71	82	73	63	78	91	757	75.7
Hydrocephalus, not acute.....	4	6	3	2	---	2	---	1	18	.12	16	12	19	22	19	26	16	26	25	199	19.9
Hemiplegia.....	4	12	5	10	2	5	3	1	42	.29	38	47	32	49	29	37	25	28	31	358	35.8
Paralysis Agitans.....	---	---	---	---	---	---	---	1	2	.01	15	36	42	31	60	67	68	59	37	417	41.7
Insanity.....	17	9	8	24	---	4	19	2	83	.57	62	77	76	56	63	56	60	58	76	667	66.7

Angina Pectoris.....	8	18	5	11	3	3	3	51	35	58	40	53	67	62	47	50	34	59	521	52.1
Syncope.....	---	---	---	---	---	---	---	---	---	4	7	9	7	8	1	13	15	14	78	7.8
Aneurism.....	---	---	1	2	1	2	1	11	.07	12	9	8	8	9	9	11	13	12	102	10.2
Senile Gangrene.....	2	8	3	5	5	3	5	33	.22	35	39	24	34	24	18	22	26	15	270	27.0
Thrombosis, Embolism.....	7	9	1	9	2	6	2	42	.29	40	26	36	36	33	25	50	53	63	403	40.3
Phlebitis.....	3	1	2	---	---	---	---	6	.04	3	4	4	4	3	4	4	4	1	37	3.7
Other Diseases of Circulatory Syst.	11	15	4	7	3	2	6	48	.33	21	149	221	116	136	112	124	58	126	1111	111.1
ORDER 4. OF RESPIRATORY SYSTEM.																				
Laryngitis.....	4	5	3	7	---	2	1	22	.15	15	20	42	35	38	28	27	19	17	263	26.3
Catarrhal Croup.....	4	2	---	1	4	---	---	11	.07	17	7	2	7	3	17	9	---	1	74	7.4
Other Dis. of Larynx or Trachea.....	---	---	---	---	---	---	---	---	---	---	5	4	3	3	2	2	3	5	27	2.7
Emphysema, Asthma.....	9	14	3	9	2	---	---	37	.25	25	44	35	61	41	44	51	40	27	405	40.5
Bronchitis.....	71	147	37	91	32	25	9	419	.291	464	391	535	539	446	521	546	481	455	4787	478.7
Pneumonia.....	287	293	93	191	56	65	47	261058	.735	1092	1284	1361	1289	1118	1465	1493	1442	1430	13032	1303.2
Pleurisy.....	7	14	2	3	3	1	2	1	.33	22	26	41	42	34	38	38	31	31	368	36.8
Other Dis. of Respiratory System.	23	24	9	22	7	12	6	5	.108	.75	82	60	70	86	61	51	44	29	652	65.2
ORDER 5. OF DIGESTIVE SYSTEM.																				
Stomatitis.....	2	1	---	2	---	---	---	5	.03	12	7	9	10	8	8	11	9	7	86	8.6
Dentition.....	1	---	1	5	---	1	---	8	.05	22	22	29	38	37	37	25	27	30	275	27.5
Quinsy.....	1	3	1	---	---	3	---	8	.05	---	10	17	10	10	14	11	10	10	102	10.2
Dyspepsia.....	1	11	8	6	2	1	---	29	.20	19	25	48	15	28	20	27	25	25	261	26.1
Hæmatemesis.....	1	2	1	---	---	2	---	1	.04	13	7	7	8	8	7	6	8	5	76	7.6
Disease of Stomach.....	19	43	15	29	10	10	11	4	.141	.98	138	137	134	115	140	136	144	136	1390	139.0
Ulcer of Stomach.....	3	9	5	2	1	1	2	23	.15	22	25	24	22	19	17	19	21	22	214	21.4
Enteritis.....	19	23	8	18	4	---	16	3	.91	.63	123	97	103	111	138	139	119	131	1190	119.0
Appendicitis.....	13	17	1	11	1	3	2	48	.33	72	67	43	31	19	17	6	---	---	303	30.3
Ulceration of Intestines.....	1	4	---	---	---	---	---	5	.03	---	18	8	14	17	8	11	8	9	98	9.8
Obstruction of Intestines.....	15	18	2	10	3	3	2	1	.54	.37	63	49	34	43	41	37	39	19	410	41.0
Strangulation of Intestines.....	---	---	---	---	---	---	---	---	---	---	2	9	4	11	5	6	5	5	47	4.7

TABLE VII—CONTINUED.

CAUSES OF DEATH.	Per cent to Total Mortality.										Aggregate for Ten Years.										Average for Ten Years.
	Harford Co.	New Haven Co.	New London Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	1899, Total.	1898, Total.	1897, Total.	1896, Total.	1895, Total.	1894, Total.	1893, Total.	1892, Total.	1891, Total.	1890, Total.	Aggregate for Ten Years.	Average for Ten Years.	
Intussusception of Intestines.....	3	4	2	1	1	1	1	11	07	4	5	4	6	19	7	7	5	7	75	7.5	
Hernia.....	7	10	2	3	3	4	4	29	20	37	29	20	29	34	26	32	21	22	279	27.9	
Fistula.....	2	2	1	1	1	1	1	2	01	2	1	3	5	3	5	3	2	2	28	2.8	
Peritonitis (not puerperal).....	23	15	11	18	3	5	7	82	57	88	108	118	129	153	128	163	136	120	1225	122.5	
Ascites.....	1	2	1	1	1	1	1	5	03	9	8	10	7	9	8	9	8	11	84	8.4	
Gallstones.....	1	2	2	2	2	2	2	7	04	11	7	5	5	6	7	8	2	4	84	8.4	
Cirrhosis of Liver.....	18	28	6	24	8	8	4	6	102	70	101	82	77	71	82	86	69	68	48	78.6	
Hepatitis.....	7	12	1	6	1	1	2	2	28	19	25	22	36	29	31	40	46	31	52	34.0	
Jaundice.....	2	2	1	1	1	1	1	8	05	26	1	1	2	8	13	16	23	34	131	13.1	
Other Diseases of Liver.....	12	13	6	13	5	6	4	7	66	45	52	83	71	46	57	39	36	41	17	50.8	
Other Diseases of Digestive System	21	19	2	16	6	5	1	4	73	50	73	32	32	24	36	36	24	29	21	380	38.0
ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																					
Addison's Disease.....	1	2	2	2	2	2	2	5	03	4	4	6	4	5	5	6	5	---	44	4.4	
Diseases of Spleen.....	1	1	1	1	1	1	1	2	01	1	2	5	1	3	1	2	3	---	20	2.0	
Bronchocele.....	1	1	1	1	1	1	1	1	3	6	1	6	1	---	1	1	2	---	15	1.5	
Diseases of Lymphatic System.....	1	1	1	2	2	2	1	6	04	11	8	6	7	5	7	3	1	---	54	5.4	
ORDER 7. OF URINARY SYSTEM.																					
Nephritis.....	37	91	36	55	6	14	6	245	170	229	291	245	231	156	177	142	150	76	1942	194.2	
Bright's Disease.....	122	109	47	108	19	43	24	487	338	536	376	363	306	317	363	340	288	294	3670	367.0	

Uremia.....	10	20	7	16	2	2	2	3	62	.43	18	47	69	58	45	48	29	38	39	453	45.3
Suppression of Urine.....	1	---	---	1	---	1	---	---	3	.02	---	2	6	3	1	1	2	3	1	22	2.2
Calculus.....	2	2	---	3	---	1	---	---	8	.05	3	3	1	5	1	---	3	5	4	33	3.3
Hematuria.....	---	---	---	---	---	---	---	---	---	---	---	6	4	4	---	2	1	3	12	3.2	
Disease of Bladder.....	16	6	8	17	6	8	8	1	70	.48	74	74	57	66	67	74	68	57	55	662	66.2
Prostatitis.....	9	1	1	3	2	1	5	---	22	.15	17	15	17	13	14	11	11	9	8	137	13.7
Other Diseases of Urinary System.....	3	2	1	2	1	2	3	2	16	.11	12	27	17	10	20	16	14	13	18	164	16.4
ORDER 8. OF GENERATIVE SYS.																					
A. Of the Reproductive Organs.																					
Diseases of the Uterus.....	4	6	---	6	---	---	2	2	20	.13	15	14	14	15	12	13	11	11	12	137	13.7
Metritis.....	2	1	---	2	1	---	---	---	6	.04	1	---	3	2	---	3	4	1	2	22	2.2
Diseases of Ovaries.....	1	2	---	2	2	1	---	---	8	.05	20	9	14	17	10	7	21	11	12	129	12.9
Disorders of Menstruation.....	2	2	1	---	---	---	---	---	3	.02	1	---	1	4	2	1	---	3	---	15	1.5
Menorrhagia.....	---	---	---	---	---	---	---	---	---	---	---	1	---	---	---	---	---	---	---	1	.1
Pelvic Abscess.....	1	1	---	---	---	---	1	1	3	.02	---	1	8	2	1	3	4	3	1	26	2.6
Perineal Abscess.....	---	---	---	---	---	---	---	---	---	---	---	1	---	---	---	---	1	1	1	4	.4
Dis. of Testis, Penis, Scrotum, etc.....	1	---	---	---	---	---	---	---	1	---	2	1	---	5	2	2	---	1	---	14	1.4
B. Of Parturition.																					
Abortion and Miscarriage.....	---	11	1	3	2	3	1	---	21	.14	10	11	16	26	16	20	9	17	6	152	15.2
Puerperal Mania.....	1	---	---	---	---	---	---	---	1	---	---	1	---	1	2	---	2	---	5	13	1.3
Puerperal Convulsions.....	5	8	1	5	1	3	---	---	23	.15	25	17	11	12	13	14	9	8	10	142	14.2
Puerperal Hemorrhage.....	1	2	---	2	1	---	---	---	6	.04	7	7	11	9	9	5	8	2	5	69	6.9
Placenta Previa.....	---	---	---	---	---	2	---	1	4	.02	3	2	5	6	6	4	2	6	3	41	4.1
Other Accidents of Childbirth.....	16	40	7	22	8	7	4	4	108	.75	81	69	68	47	56	55	59	42	50	633	63.3
ORDER 9. OF ORGANS OF LOCOMO.																					
Caries, Necrosis.....	---	---	---	---	3	---	---	---	5	.03	---	5	6	1	3	8	4	3	7	42	4.2
Arthritis, Periostitis.....	2	---	---	---	---	---	---	1	---	---	---	9	3	9	7	7	9	19	3	67	6.7
Other Dis. of Organs of Locomotion.....	---	---	---	---	---	1	---	---	1	---	---	---	2	---	---	2	1	1	1	8	.8

TABLE VII.—CONTINUED.

CAUSES OF DEATH.	ORDER 10. OF INTEGRUMENTARY SYSTEM.										Per cent. to Total Mortality.	Aggregate for Ten Years.										Average for Ten Years.
	Hartford Co.	New Haven Co.	New London Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	1899, Total.	1898, Total.		1897, Total.	1896, Total.	1895, Total.	1894, Total.	1893, Total.	1892, Total.	1891, Total.	1890, Total.			
ORDER 10. OF INTEGRUMENTARY SYSTEM.	Bedsores										1			1	3	2		1				
	Carbuncles														3	3	5	2				
	Other Dia. of Integumentary Sys	2	6	3	6	2	1	1		21	14	16	20	9	15	12	7	13	11	10		
Class VII.—Violence.																						
ORDER 1. ACCIDENT AND NEGLIGENCE.																						
ORDER 2. HOMICIDE.																						

ORDER 3. SUICIDE.

Gun-Shot Wounds.....	2	3	1	7	3	16	.11	11	23	15	31	26	26	19	29	17	212	21.2
☞ Cut, Stab.....	2	5	---	---	1	8	.05	11	6	7	11	10	9	8	6	12	88	.88
Poisoned.....	4	18	2	9	2	38	.26	20	20	31	29	19	22	13	16	8	214	21.4
By Opium.....	---	---	---	---	---	---	---	---	4	---	5	6	4	7	7	6	39	3.9
Drowning.....	1	2	2	1	1	7	.04	8	16	17	14	24	24	17	18	27	172	17.2
Hanging.....	4	4	---	4	2	15	.10	20	19	16	13	22	21	24	24	16	190	19.0
Otherwise.....	2	1	2	1	1	7	.04	12	12	3	4	6	5	5	2	7	63	6.3

ORDER 4. EXECUTION.

Hanging.....	---	---	---	---	---	---	---	1	3	1	---	1	---	2	1	---	9	.9
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Class VIII.—Unclassified.

Tumor	4	4	6	1	1	1	18	.12	4	41	50	39	44	35	31	24	31	317	31.7
Dropsy	2	1	1	1	2	1	14	.09	7	37	62	65	64	65	94	76	74	558	55.8
Debility, Atrophy, Inanition	88	106	31	67	6	13	325	2.25	343	303	284	258	342	319	339	354	318	3185	318.5
Stroke	---	---	---	---	1	1	---	---	14	4	63	7	12	8	27	3	12	153	15.3
Exhaustion	1	2	---	---	---	3	.02	6	48	74	57	48	74	56	77	41	484	48.4	
Hemorrhage	3	---	---	2	1	1	8	.05	7	30	39	43	42	41	44	41	346	34.6	
Abscess	3	3	1	3	3	1	2	.16	.11	4	24	38	26	10	18	21	17	200	20.0
Sudden Death	---	---	---	---	---	---	---	---	---	4	3	16	10	5	28	17	17	110	11.0
Other ill-defined causes	13	19	8	18	3	5	73	.50	102	165	232	178	149	177	159	145	202	1582	158.2
Cause not stated	13	5	3	4	3	2	35	.24	32	24	20	22	32	30	56	38	33	322	32.2
Heart Failure	---	---	---	---	---	---	---	---	23	---	---	---	---	---	---	---	---	223	22.3

[illegible]

TABLE VIII—CONTINUED.

TOWNS.	AGES.													Total Births.	Total Deaths.	Sex not stated.	Males.	Females.	Total Births.	Sex not stated.
	Under 1 year.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 & over.							
Morris	2													3						
Naugatuck	48	17	4	4	20	13	12	15	15	1	2	7	1	10	12	17	1	1	12	7
New Britain	130	28	12	10	27	29	23	29	24	37	20	5	8	30	34	35	20	13	35	23
New Canaan	8	2	1	2	3	3	3	3	3	2	2	5	1	4	2	3	1	4	11	1
New Fairfield														1	1	1	1	1	1	1
New Hartford	10	10	2	2	1	5	5	6	6	8	6	3	2	7	2	4	8	26	29	8
New Haven	316	120	32	50	153	183	166	194	220	180	84	20	2	125	128	145	156	87	172	289
Newington	4	1	1	1	1	2	1	1	1	5	2	1	1	1	3	1	1	11	11	15
New London	68	9	9	13	22	42	30	24	31	41	24	3	2	21	27	32	28	154	164	384
New Milford	11	4	1	1	6	4	3	4	4	13	7	11	1	8	4	4	4	38	31	69
Newtown	6	4	1	1	5	3	3	1	2	4	4	4	1	7	5	4	6	15	11	26
Norfolk	4	2	1	1	1	1	1	1	1	3	4	4	1	3	1	1	1	12	12	14
North Branford	2	3	1	1	1	3	3	5	6	3	3	2	1	3	2	2	1	13	21	46
North Canaan	5	3	1	2	1	2	1	1	1	4	2	2	1	3	5	6	1	15	13	35
North Haven	1	3	1	1	1	1	1	1	1	1	1	1	1	2	2	1	1	13	21	34
North Stonington	48	22	6	9	22	29	17	22	30	46	28	4	1	27	32	33	33	188	200	349
Norwalk	57	24	11	16	19	21	30	41	51	63	53	1	1	34	38	41	30	173	200	535
Norwich	1	1	1	1	1	3	1	1	1	4	5	1	1	2	1	1	1	13	21	46
Old Lyme	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	1	1	13	21	46
Old Saybrook	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	1	1	13	21	46
Orange	12	7	2	4	5	8	7	9	10	14	13	3	4	6	7	10	9	43	47	90
Oxford	23	2	4	4	6	9	9	11	13	11	11	2	2	13	15	16	10	50	44	94
Plainfield	23	2	4	4	6	9	9	11	13	11	11	2	2	13	15	16	10	50	44	94
Plainville	10	1	1	3	6	8	8	1	6	4	4	1	1	6	8	9	5	20	31	60
Plymouth	10	1	1	3	6	8	8	1	6	4	4	1	1	6	8	9	5	20	31	60
Pontret	7	8	4	2	2	2	2	2	3	3	3	1	1	11	12	13	10	37	41	77
Portland	7	8	4	2	2	2	2	2	3	3	3	1	1	11	12	13	10	37	41	77
Proston	5	10	1	1	1	1	1	1	1	1	1	1	1	11	12	13	10	37	41	77
Proston	5	10	1	1	1	1	1	1	1	1	1	1	1	11	12	13	10	37	41	77
Pucon	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Reading	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Rehoboth	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Rocky Hill	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Roxbury	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Salem	28	10	6	10	8	8	8	12	15	14	8	6	1	13	15	16	12	62	53	114
Saybrook	7	4	2	2	6	6	6	6	7	8	7	3	1	11	12	13	9	23	26	56
Saybrook	7	4	2	2	6	6	6	6	7	8	7	3	1	11	12	13	9	23	26	56

DEATHS—BY AGE AND SEASON.

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[illegible]

TABLE IX.
DEATHS AND BIRTHS IN TOWNS. ALPHABETICAL ARRANGEMENT, DISTINGUISHED BY NATIONALITY.

TOWNS.	DEATHS.										BIRTHS.																				
	NATIVITY OF DECEDENTS.										NATIVITY OF PARENTS.																				
	Connecticut.	Other States.	England.	Ireland.	Scotland.	Canada.	Germany.	Italy.	France.	Sweden.	Russia.	Other Foreign Countries.	Total Native Decedents.	Total Foreign Decedents.	Nativity Unknown.	Total of all Nativity.	Each of U. S. Nat.	Both English.	Irish.	Scotch.	Canadian.	German.	Italian.	French.	Swedish.	Russian.	Other Foreign Countries.	Parentage Unknown.	Total Births.		
Andover	5												7	117	61	178	104	86	1	64	2	3	14	7		9	23	24	3	262	
Ansonia	108	9	12	28	3	1	0	2	1	2	2	4	18	18	1	19	14	1											16		
Ashford	12	6				1							3	18	1	19	14	1											14		
Avon	4			1			1			1			3	11	5	11	5	4											1	18	
Barthamsted	11												12	1	2	13	13	2	1										1	13	
Beacon Falls	10			1									10	2	2	14	4	1											1	12	
Berlin	26	2	1	4	1					2			39	8	47	20	9	3	2										2	8	58
Bethany	28												36	6	1	43	17	5											1	68	
Bethel	26	10	1	3		1	1			1			36	6	1	43	41	6												9	
Bethlehem	26												24	6	1	31	16	4												31	
Bloomfield	21	3	1	5									24	6	1	31	16	4												31	
Boston	6												7	3		10	6	2												10	
Bozrah	6			3									7	3		10	6	2												10	
Bridgeport	594	129	33	161	6	15	49	8		8	2	4	73	25	1	109	46	33	0										2	176	
Bridgewater	8												35	9	26	63	27	0											82	194	
Bridgewater	87	10	3	11	1	3	2			3	1		108	24	1	131	13	38	1	18									2	270	
Brookfield	15	5	1	2		6							26	7	1	40	16	9	1											45	
Brooklyn	29	4											32	7	1	40	16	9	1											55	
Burlington	17	5		2									22	3	1	26	11	2												32	
Canaan	19	6		3									22	3	1	26	11	2												32	
Canterbury	19	6		3									22	3	1	26	11	2												32	
Canton	24	1											25	5	2	32	14	7												47	
Chaplin	16												17	9	1	27	22	4												38	
Chatham	16												17	9	1	27	22	4												38	
Cheshire	24	2	1										23	2	1	29	14	2												33	
Chester	14	1	6										15	7	1	23	10	3												23	
Clinton	23	1											27	1	2	31	11	2												34	
Colchester	10	1		5									11	5	1	16	14	4												25	
Colchester	5	7											11	5	1	16	14	4												25	
Columbia	8												8	1	1	14	6	4												9	
Cornwall	19	6	1										25	3	2	30	10	3												30	
Cornwall	19	6	1										25	3	2	30	10	3												30	
Cromwell	100	68	8	53	4	1	2						14	7	7	23	15	15												61	
Danbury	10	68	8	53	4	1	2						14	7	7	23	15	15												61	
Darien	38	18	3	9			4					2	63	18	4	75	18	8												93	

DEATHS AND BIRTHS—BY NATIONALITY.

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Derby	84	12	1	31	2	8	7	1		4	96	49	11	156	60	41	2	10	2	2	2	2	1	7	28	4	170
Durham	17	1	1								15	11	1	11	11	1										13	18
Eastford	12	1	1								18	9	1	16	8	2										10	6
Easton	10	1	1								15	3	1	16	5											6	38
East Granby	43	1	1								48	6	2	53	24	4										2	185
East Haddam	73	13	1								94	21	2	106	71	28	3									6	136
East Hardford	12	4	12	2							118	9	1	36	18	6										1	51
East Haven	13	1	1								118	3	1	36	18	6										1	79
East Lyme	32	2	1								17	7	1	23	12	1										2	92
East Lyme	16	1	1								30	11	7	42	19	1										1	35
East Windsor	54	1	1								59	43	1	103	62	47	2	13								1	149
Ellington	26	8	1								30	8	1	63	32	7										4	41
Essex	46	7	1								53	14	1	63	43	18	1	4								4	66
Fairfield	29	5	10	2							32	14	1	47	31	12		5								4	57
Farmington	20	8	1								48	10	3	12	13	1		1								3	97
Franklin	46	1	1								48	10	3	12	13	1		1								3	97
Glastonbury	9	1	3								18	7	7	174	85	53		19								3	33
Goshen	12	6									130	37	7	49	37	45	2	8								3	197
Granby	93	37	2	24	2						87	12	4	49	37	45	2	8								3	127
Greenwich	34	3	1								86	5	4	95	68	16		3								3	110
Graydon	65	21	1	2							87	8	1	41	28	11	1	3								1	160
Guilford	35	2	1	2							87	8	1	41	28	11	1	3								1	36
Guildford	28	2									30	5	2	32	10	5		3								1	93
Haddam	49	11	8	8							60	13	1	74	42	23		3								1	17
Hamden	7	2									9	1	1	10	15			3								1	17
Hartford	89	215	33	242	14	22	43	20	1	13	104	482	34	1540	681	347	26	263								25	1918
Hartland	10	1	1								10	1	1	11	11												

TABLE IX.—CONTINUED.

TOWNS.	DEATHS.										BIRTHS.																		
	NATIVITY OF DECEDENTS.										NATIVITY OF PARENTS.																		
	Connect- icut.	Other States.	England.	Ireland.	Scotland.	Canada.	Germany.	Italy.	France.	Sweden.	Russia.	Other For- eign Countries.	Total Native Decedents.	Total Foreign Nativity Unknown.	Total of all Nations.	Both U. S. Citizens.	Each of Foreign Nat.	Both Par. English.	Irish.	Scottish.	Canadian.	German.	Italian.	French.	Swedish.	Russian.	Other For- eign Countries.	Percentage Unknown.	Total Births.
Morris	5														6	6		5	52	2	5	3	10	1	42	20	23	5	336
Naugatuck	104	18	6	22			2				5	4	122	43	170	91	67	5	52	2	5	9	10	1	42	20	23	5	336
New Britain	219	32	12	51	4		20	1		18	4	3	251	115	370	268	134	17	52	2	9	34	19	1	140	70	23	1	743
New Canaan	22	8	2				1						30	4	37	22	7	2											36
New Fairfield	5	5													11	6													7
New Hartford	41	9	1				2						50	12	62	19	11				28	15	466	1	82	256	23	4	89
New Haven	923	219	37	291	15	12	94	42	5	15	19	21	1142	551	1721	1032	547	28	810	14	18	117	466	1	82	256	23	4	2897
New London	17	3											20	2	22	8	3	1											16
New Milford	202	41	11	41	1	2	7	2			1	1	243	67	318	207	70	3	45	4	4	5	17	1	1	18	22	2	394
Newtown	44	4											48	17	66	32	8	1	8	1	1	1		2					100
Norfolk	16	5											21	5	26	32	6	1	8	1	1	1							84
North Branford	15	4											19	2	21	26	2	2	1										15
North Canaan	17	9	1										26	2	31	20	5	1	2	1	1	15							36
North Haven	27	2					2						23	1	34	20	5	1	2	1	1	15							55
North Stonington	8												20	2	24	20	4	1	2	1	1	15							84
Norwalk	162	64	6	32			2	1	1	2	2	2	230	50	280	181	67	4	30	2	74	40	5		6	6	27	2	322
Norwich	197	53	7	69	7	16	10	2					250	122	373	180	104	10	38	2	38	40	5		9	85	23	1	585
Old Lyme	16	3											11	6	17	5	5												27
Old Saybrook	60	15	2	3		2	3						72	14	86	50	88	1	6		1	6			9				125
Orange	13	1											13	3	17	7	8												106
Oxford	56	13	2	7		13	2						66	24	94	36	30	3		34		2		1	3				106
Plainfield	25	5	1	2									30	3	34	27	8	3	1										80
Plymouth	33	5								3			38	12	50	27	11	3	4	1	2				1	6			90
Pomfret	16	3											19	2	21	20	11	1	6	1									47
Portland	33	4	2	19						4		1	37	26	64	27	12	1	5	1				1	24	12	3	2	96
Preston	31	3	1	1									34	3	39	18	7	1	1		1								88
Prospect	7												8	2	8	4													8
Putnam	58	15	1	10		23	1						73	35	114	48	41			28									125
Redding	16	1											17	3	20	17	3												30
Ridgfield	26	12	1	2									38	3	43	26	11	1											64
Rocky Hill	16	4	1										20	3	24	10	8												14
Roxbury	10												10	1	11	10	8												16
Salem	2												2		3	10	3												13

DEATHS AND BIRTHS—BY NATIONALITY.

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Salisbury	98	20	6	1	2	1	1	46	6	8	55	39	10	2	1	1	3	2	2	54										
Saybrook	23	5	7	1	1	1	3	27	3	1	31	17	5	1	3	1	3	2	2	28										
Scotland	8	7	1	1	1	1	15	42	15	1	58	33	19	3	2	1	7	3	3	3										
Seymour	36	7	1	1	1	1	1	24	1	1	27	23	7	1	1	1	1	6	4	34										
Sharon	16	8	3	1	1	1	3	35	3	1	45	27	4	1	1	1	1	1	1	11										
Sherman	4	6	1	1	1	1	13	9	1	1	20	14	7	2	1	1	1	1	1	42										
Simsbury	29	0	1	1	1	1	8	20	8	1	20	21	3	1	1	1	1	1	1	32										
Simsbury	13	7	1	1	1	1	1	16	3	1	118	73	3	1	1	1	1	1	1	3										
Somers	16	12	2	1	1	1	1	35	9	1	31	30	3	1	1	1	1	1	1	8										
Southington	17	6	1	1	1	1	1	22	7	1	18	12	8	2	1	1	1	1	1	45										
South Windsor	17	1	1	1	1	1	1	20	9	1	18	10	3	2	1	1	1	1	1	30										
Sprague	37	14	1	1	1	1	1	51	7	1	83	108	16	3	1	1	1	1	1	8										
Stafford	150	64	6	58	4	3	11	227	88	7	315	108	3	1	1	1	1	1	1	544										
Stamford	18	9	7	15	1	1	1	27	3	1	28	22	40	51	1	1	1	1	1	1										
Sterling	60	22	5	4	1	1	1	91	15	3	118	74	9	20	1	1	1	1	1	1										
Stratford	44	15	5	4	1	1	1	59	10	3	77	47	9	7	1	1	1	1	1	1										
Tolland	35	15	1	6	1	1	1	50	15	3	63	40	11	10	1	1	1	1	1	1										
Thompson	26	14	6	4	1	1	1	64	23	2	94	50	23	4	1	1	1	1	1	1										
Thompson	19	6	4	6	1	1	1	25	14	2	13	8	2	10	3	1	1	1	1	1										
Tolland	10	1	1	1	1	1	1	11	1	1	13	8	2	1	1	1	1	1	1	1										
Torrington	90	2	13	1	1	1	1	11	30	7	150	112	60	10	29	2	2	2	2	1										
Trombly	16	20	2	1	1	1	1	21	7	1	23	9	1	1	1	1	1	1	1	1										
Union	64	9	8	12	2	2	2	7	50	2	125	39	57	12	4	1	1	1	1	1										
Vernon	7	4	10	17	1	1	1	11	1	1	11	13	3	10	22	12	17	5	6	170										
Voluntown	80	9	2	1	1	1	1	88	37	2	127	92	62	10	22	12	17	5	6	10										
Warren	24	4	14	140	7	19	23	28	6	1	34	17	1	1	1	1	1	1	1	1										
Washington	463	77	1	2	1	1	1	940	267	6	785	388	294	13	393	9	129	43	130	3										
Waterbury	40	5	1	2	1	1	1	47	5	1	53	33	11	4	6	1	1	1	1	1										
Watford	37	5	1	2	1	1	1	34	5	1	40	24	18	1	6	1	1	1	1	1										
Watertown	17	12	1	16	1	1	1	23	17	2	13	8	2	1	1	1	1	1	1	1										
West Hartford	12	10	2	6	1	9	1	23	19	1	12	12	41	14	1	1	1	1	1	1										
Weston	36	10	2	6	1	9	1	46	19	1	66	27	10	1	1	1	1	1	1	1										
Westport	24	9	2	1	1	2	1	38	6	5	13	13	10	1	1	1	1	1	1	1										
Wethersfield	11	5	1	1	1	1	1	30	6	6	33	17	7	1	1	1	1	1	1	1										
Willington	25	18	4	13	1	1	1	30	26	6	106	102	27	1	1	1	1	1	1	1										
Windsor	56	22	8	27	2	12	1	74	48	5	175	102	60	8	1	1	1	1	1	1										
Windsor	100	22	1	1	1	1	1	122	11	1	54	32	13	13	1	1	1	1	1	1										
Windsor Locks	20	12	1	10	3	2	1	82	16	1	50	3	6	2	1	1	1	1	1	1										
Woodbridge	7	1	2	4	1	1	1	2	9	1	21	27	6	4	1	1	1	1	1	1										
Woodbury	18	6	2	4	1	1	1	29	7	1	37	21	6	1	1	1	1	1	1	1										
Woodstock	21	8	1	4	1	1	1	29	7	1	37	21	6	1	1	1	1	1	1	1										
Total	8462	1926	392	1920	113	256	483	126	25	120	100	173	10688	3878	315	14381	8299	4041	853	1918	86	830	870	1253	40	833	923	1198	296	30653

TABLE X.
RECAPITULATION OF TABLES EIGHT AND NINE.

[illegible]

NATIONALITY.

D'ths of those born in Conn. other States		8,462	8,431	8,269	9,258	8,932	8,248	9,152	9,254	8,903	8,586	58.8	59.4	59.4	61.8	61.4	60.2	61.4	61.0	61.8	62.8
Total for the United States		1,925	1,848	1,804	1,999	1,947	1,839	1,908	1,971	1,913	1,721	13.3	13.0	12.9	13.3	12.8	13.4	12.8	12.9	13.2	12.5
D'ths of those born in Eng. Ireland		362	308	341	372	329	343	375	408	341	337	2.5	2.1	2.4	2.4	2.5	2.5	2.5	2.6	2.3	2.3
Canada		1,920	1,810	1,808	1,839	1,815	1,757	1,990	2,020	1,879	1,822	13.3	12.7	12.9	12.2	12.4	12.8	13.3	13.3	13.0	13.3
Germany		256	286	295	237	269	251	250	275	245	204	1.7	2.0	2.1	1.5	1.8	1.8	1.6	1.7	1.7	1.4
Italy		483	410	471	449	449	444	446	433	448	383	3.3	2.8	3.3	2.9	3.0	3.2	3.0	2.8	3.1	2.7
Sweden.		126	168	106	106	93	101	93	67	68	49	1.1	1.1	1.1	.7	.6	.7	.6	.4	.3	.3
Other foreign Countries		120	128	73	135	128	110	115	125	110	93	1.1	.5	.1	.8	.7	.8	.7	.8	.7	.6
Total of Foreign Deaths		411	381	420	344	324	327	313	326	283	255	2.8	2.7	3.0	2.2	2.1	2.3	2.1	2.1	1.9	1.8
Total of Foreign Deaths		3,678	3,494	3,514	3,482	3,409	3,333	3,582	3,654	3,377	3,143	23.8	24.6	25.2	23.1	24.0	24.3	24.0	24.0	23.4	23.0
Nativity not stated		315	397	328	286	258	279	259	291	192	215	2.1	2.8	2.3	1.9	1.7	2.0	1.7	1.9	1.3	1.5
Grand Total		14,381	14,170	13,915	15,025	14,546	13,699	14,901	15,170	14,385	13,665	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
SEASONS.*																					
Deaths in Spring		3,437	3,617	3,750	3,815	3,785	3,142	3,997	3,648	3,628	3,248	23.8	25.5	26.9	25.3	26.8	22.9	26.8	24.0	25.2	23.7
Summer		3,816	3,620	3,450	4,438	3,694	3,812	3,870	3,876	3,631	3,599	26.5	25.5	24.8	29.5	26.0	27.8	26.0	25.5	25.2	26.3
Autumn		3,178	3,508	3,298	3,369	3,496	3,182	3,233	3,281	3,392	3,025	22.1	24.7	23.7	22.4	21.7	23.2	21.7	21.6	23.5	22.1
Winter		3,950	3,425	3,407	3,403	3,571	3,563	3,801	4,365	3,734	3,793	27.4	24.1	24.4	22.6	25.5	26.0	25.5	28.7	25.9	27.7
Total		14,381	14,170	13,915	15,025	14,546	13,699	14,901	15,170	14,385	13,665	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
BIRTHS.																					
Births in Spring		4,973	5,270	5,062	5,324	4,980	5,331	5,013	4,997	4,565	4,354	23.8	25.0	24.5	24.9	24.6	26.1	24.6	25.3	24.5	25.0
Summer		5,419	5,310	5,460	5,031	5,136	5,412	5,307	5,037	4,838	4,412	25.9	25.3	25.8	25.6	25.2	25.4	26.1	25.5	26.0	25.3
Autumn		5,292	5,265	5,098	5,420	4,974	4,868	4,931	4,836	4,592	4,282	25.4	25.0	24.7	25.4	24.2	23.9	24.2	24.4	24.7	24.6
Winter		5,172	5,169	5,110	5,120	4,916	4,950	5,045	4,880	4,563	4,346	23.7	24.5	24.8	24.0	24.8	24.3	24.8	24.6	24.5	24.9
Total		20,855	21,023	20,580	21,324	19,931	20,345	20,296	19,750	18,558	17,394	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

* A few not stated by seasons are distributed equally.

TABLE XI.
CAUSES OF DEATH BY MONTHS, AGE AND SEX, NOSOLOGICALLY ARRANGED BY CLASSES AND ORDERS.

January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Month not stated.	CAUSES.	Under 1.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Age not stated.	Male.	Female.	Sex not stated.	Total.
														Class I.—Zymotic Diseases.																	
														ORDER 1. MIASMATIC.																	
1	1	5	5	7	5	11	1	1	1	1	7	7	Measles.....	16	24	2	1	2	2	2	1	1	1	1	1	1	23	23	46		
7	4	7	2	6	5	3	4	3	3	2	4	4	Scarlet Fever.....	2	24	15	3	3	3	2	1	1	1	1	1	1	25	25	50		
19	14	75	41	22	11	4	3	4	9	9	16	16	Influenza.....	37	14	6	12	27	37	26	68	95	161	124	35	2	6,290	370	660		
9	10	3	7	6	2	10	26	38	30	22	23	23	Typhoid Fever.....	1	6	7	22	68	43	18	10	5	4	1	1	1	106	80	186		
5	3	11	15	12	14	10	5	4	5	3	3	3	Cerebro-spinal Fever.....	25	24	10	10	4	8	4	2	1	2	1	2	4	46	44	90		
1	2	2	3	2	1	1	5	1	5	1	1	1	Continued Fever.....	2	2	2	2	3	7	4	3	3	1	1	1	2	13	10	23		
7	15	9	9	10	19	17	20	10	7	6	10	6	Whooping Cough.....	82	47	5	1	1	1	1	1	1	1	1	2	2	59	79	139		
14	8	11	7	10	7	16	9	17	21	32	21	21	Diphtheria.....	10	86	54	14	3	4	1	1	1	1	1	1	90	83	173			
8	9	4	7	3	1	1	1	6	6	11	8	8	Membranous Croup.....	4	53	6	1	1	1	1	1	1	1	1	1	32	32	64			
													Other Miasmatic Diseases.....								2							3	3	3	

ORDER 2. DIARRHEAL.

2	1	2	9	35	214	169	75	14	6	2	Cholera Infantum.....	458	64	1	272	261	523
7	3	10	8	39	132	96	71	25	17	9	Infantile Diarrhoea.....	361	64	2	226	199	425
			1	1	3	7	8	3	2		Cholera Morbus.....	2		3	1	5	3
1	2	1	2	2	11	43	33	9	1	3	Dysentery.....	23	22	7	5	1	5
				5	10	14	6	6	2	3	Diarrhoea.....		2	1	2	2	3
ORDER 3. MALARIAL.																	
			2	3		3	2		1	1	Intermittent Fever.....		2		3	2	2
1	1	1	1	2	1	2	1	2	2	3	Remittent Fever.....		3	1	1	2	3
1			1	5	1	2	1	2	1		Ferocious or Congestive Fever.....		3		4	2	3
	1	4	6	3	5	12	16	19	6	5	Other Malarial Diseases.....	3	16	4	4	2	6
ORDER 4. ZOOGENOUS.																	
											Other Zoogenous Diseases.....						
ORDER 5. VENEREAL.																	
	1		1		4	1	5	1	1	3	Syphilis.....	6	1		2	4	4
						1					Gonorrhoea.....					1	2
																14	5
																1	1
ORDER 6. SEPTIC.																	
2	2	2	6	2	2	1	3		3	3	Erysipelas.....	12	2		1	1	2
7	3	3	3	2	4	5	3	2	3	9	Pyæmia, Septicæmia.....	6	1	3	5	6	10
6	1	6	3	3	4	2	3	2	1	2	Puerperal Fever.....				3	18	14
Class II.—Parasitic Diseases.																	
			1				1				Thrush.....	1	1				1
											Other Parasitic Diseases.....	1	1				1

TABLE XI.—CONTINUED.

CAUSES.													Under 1.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Age not stated.	Male.	Female.	Sex not stated.	Total.	
January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Month not stated.																			
Class III.—Dietetic Diseases.																															
1	1	1	2	1	1	1	1	1	1	2	1	1	5																		
6	9	4	6	5	4	5	4	3	4	10	6																				
1	1	1	1	1	1	1	1	1	1	1	3																				
1	1	1	1	1	1	1	2				2																				
Class IV.—Constitutional Dis.																															
7	7	10	11	17	4	13	5	3	9	9	10		1	2	7	7	16	13	9	18	25	4	2		1	56	49			105	
1	1	2			1	1	1	1	1	1	1																	1			1
9	7	7	5	6	4	4	2	6	7	9	5		5	1														4	2		6
8	11	10	8	8	9	8	7	7	7	7	7				1		7	9	15	18	12	8					71				71
6	4	12	9	10	10	5	6	6	10	6	6					1	4	14	30	31	13	6					1	41	59		100
28	18	26	25	28	32	22	25	20	19	28	47						1	10	20	23	20	10	5				1	71	90		90
														2		3	8	17	36	73	75	61	22	4		7	128	180			308
9	7	5	13	5	6	6	3	4	3	7	1		2		1													3	1		4
40	136	122	142	116	101	127	118	106	109	101	133		32	28	2	5	2											37	32		69
2	4	4	3	8	2	8	4	8	6	4	3		27	36	14	132	436	337	192	113	93	52	12	1		6	766	695			1451
													8	8	1	5	8	6	3	6	2	5					3	29	27		56

[illegible]

TABLE XI—CONTINUED.

CAUSES.												Under 1.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Age not stated.	Male.	Female.	Sex not stated.	Total.							
January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Month not stated.	Insanity	Chorea.	Epilepsy	Convulsions	Trismus Nascentium	Tetanus.	Paraplegia	Diseases of Spinal Cord	Myelitis.	Spinal Meningitis.	Locomotor Ataxia.	Other Dis. of Nervous System.												
7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	7 4 10 7 3 7 3 7	Month not stated.	1	8	9	10	12	13	15	13	2					39	44		83							
1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	Chorea	3	3			1								2	3		5								
7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	7 5 6 6 1 6 3 3	Epilepsy	8	8	5	5	7	6	3	3	1				24	23		47								
19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	19 17 20 18 12 23 12 24 14 20 12 10	Convulsions	153	36				2	1	2				2	99	102		201								
3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	3 3 3 3 3 3 3 3	Trismus Nascentium	7												4	3		7								
2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	2 2 2 2 2 2 2 2	Tetanus.	2				2	1							12	2		14								
2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	2 1 4 2 1 1 1 1	Paraplegia	3	1	3	2		2		2	1				10	9		5								
1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	Diseases of Spinal Cord	3	1	1	3	2	2	3	2	2				10	9		19								
1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	1 2 3 6 3 1 2 1	Myelitis.	10	7	5	2	2	1		1					18	10		28								
1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	Spinal Meningitis.	7	5	2	2	1								18	10		28								
23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	23 17 29 24 22 15 19 16 14 17 22	Locomotor Ataxia.	10	6	5	4	5	16	24	26	37	59	33	9	1	2	131	106	237							
ORDER 2. OF ORGANS SPE. SENSE.																																				
3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	3 1 1 3	Epistaxis	1													1			1							
												Otitis	1		2		3	2	3		1					6	7		13							
ORDER 3. OF CIR. SYSTEM.																																				
8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	8 7 7 11 12 14 8 13 6 5 9	Endocarditis.	1		1	2	4	5	12	15	20	24	12	2	1	54	55		109							
40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	40 36 47 31 45 24 23 29 36 29 33 39	Valvular Disease of Heart.	8		3	11	23	23	25	64	70	119	53	5	1	6	196	215	411							
47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	47 51 31 47 43 37 33 39 51 49 36 57	Disease of Heart.	6	1	2	6	14	21	47	73	128	130	69	8		6	263	244	508							

1	1	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
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TABLE XI—CONTINUED.

CAUSES.													Under 1.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Age not stated.	Male.	Female.	Sex not stated.	Total.											
January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Month not stated.																													
													Fistula																												
11	8	6	6	5	5	8	7	6	5	6	8	1	Pertinitis (not puerperal)	3	1	5	14	19	8	11	9	2	6	4	1	1	34	48	1	82											
2	1	1	1	1	1	1	2	1	1	1	1	1	Ascites	1	1	1	1	1	2	1	2	1	1	1	1	2	3	3	5	6											
2	1	1	1	1	1	1	1	1	1	1	1	1	Gallstones	1	1	1	1	1	1	1	2	2	1	1	1	7	7	7	7	7											
12	7	6	6	10	13	7	6	6	15	7	7	7	Cirrhosis of Liver	1	1	1	2	11	18	26	19	22	1	1	1	72	30	102	102	102											
3	3	2	1	2	2	3	2	1	3	3	3	3	Hepatitis	1	1	1	3	4	3	2	4	6	1	3	1	14	14	28	28	28											
2	4	2	4	1	1	1	1	1	1	1	1	1	Jandice	4	1	1	1	1	1	1	1	1	1	1	1	6	2	8	8	8											
4	5	9	3	5	4	4	8	5	9	4	6	6	Other Diseases of Liver	4	3	1	3	6	8	10	19	7	4	1	1	34	32	66	66	66											
3	6	6	4	6	3	8	12	8	6	4	7	7	Other Dis. of Digestive System	13	3	3	1	6	2	4	9	9	12	11	1	36	37	73	73	73											
													ORDER 6. OF LYMPHATIC SYSTEM AND DUCTLESS GLANDS.																												
2													Addison's Disease			1				2	2					2	3	5	5	5											
													Disease of Spleen			1											2	2	2	2	2										
													Diseases of Lymphatic System			1		3	1	1						4	2	6	6	6											
													ORDER 7. URINARY SYSTEM.																												
23	24	20	21	20	22	20	18	24	21	15	17	17	Nephritis	8	13	1	5	27	26	39	31	37	40	13	3	2	126	120	245	245	245										
49	46	41	45	41	38	40	45	38	33	36	35	35	Bright's Disease	3	2	1	13	36	56	50	93	81	104	37	3	1	726	726	487	487	487										

[illegible]

TABLE XI—CONTINUED.

CAUSES.													Under 1.	1 to 5.	5 to 10.	10 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Age not stated.	Male.	Female.	Sex not stated.	Total.																																		
January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Month not stated.	ORDER 10. OF INTEG. SYSTEM.													4	1	1	1	1	3	2	3	2	3	2	2	11	10	21																								
													Dis. of Integumentary System													Class VII.—Violence.													ORDER 1. ACCIDENTS AND NEGLIGENCE.																									
													Fractures and Contusions													3	2	8	7	15	7	10	13	14	20	8				70	37	107																						
6	11	7	7	4	10	13	6	10	16	7	10		Railroad Injuries													1	1	8	10	29	28	16	16	11	4	1		5	112	18	130																							
10	6	14	8	7	5	9	36	8	12	6	9		Gun-shot Wounds															1	14	2	2	2	1				22	2	24																									
1	1		3	3	2	3	2	2	1	3	3		Burns and Scalds													33	11	2	7	8	10	2	4	2	2		3	28	56	84																								
11	6	6	11	6	7	1	5	5	3	10	13		Poisoned													2	4	2	7	11	5	10	4	2			33	14	47																									
3	2	7	7	2	2	5	6	3	4	2	4		Drowning													1	3	18	27	16	16	14	6	10	1		4	96	19	115																								
5	2	10	5	12	15	16	16	17	4	3	6		Suffocation													7	2	1					1	1			1	6	7	13																								
3		2						1		1	4		Other Accidents													11	5	5	13	28	41	26	26	32	16	4	1	170	65	235																								
25	27	15	14	11	21	20	17	22	18	24	21		ORDER 2. HOMICIDE.																																																			
1				1			1						Murder																1		2	1						3	1	4																								

ORDER 3. SUICIDE.

1	3	1	1	2	2	2	1	1	1	1	2	6	5	1	2	14	2	16
1	1	1	1	2	2	2	1	1	1	1	2	2	2	1	3	7	1	8
1	3	1	5	6	5	3	3	4	4	2	11	9	6	5	1	21	17	38
1	1	2	3	1	2	1	1	2	1	1	1	4	3	1	1	4	3	7
1	1	2	2	1	1	1	1	2	1	1	4	3	3	2	2	13	2	15
1	1	2	2	1	1	1	1	1	1	1	2	1	1	1	1	6	1	7

Class VIII.—Unclassified.

1	1	2	1	1	1	1	3	2	2	1	1	1	3	5	4	2	2	18						
1	2	2	1	1	1	2	2	2	1	1	1	1	2	3	5	8	3	14						
19	21	24	21	18	25	46	33	37	17	21	270	14	2	3	2	6	9	10	1	2	185	139	1	325
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	3	1	3	3
2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3
7	4	10	6	4	4	5	7	7	4	8	3	1	2	2	1	3	2	1	1	1	7	9	16	73
6	4	1	1	4	4	1	3	1	2	4	16	1	1	1	1	1	4	4	1	1	1	15	20	35
Tumor																								
Dropsy																								
Debility, Atrophy, Inanition																								
Sunstroke																								
Exhaustion																								
Hemorrhage																								
Abscess																								
Other ill defined causes																								
Cause not stated																								

TABLE XII.
OCCUPATIONS AND AGES OF DECEDENTS.

OCCUPATIONS.	15 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.	Are not stated.	Total, 1899.	Total, 1898.	Total, 1897.	Total, 1896.	Total, 1895.	Total, 1894.	Total, 1893.	Total, 1892.	Total, 1891.	Total, 1890.
I. Tillers of the Soil.																					
Farmers	7	19	39	44	81	127	233	142	21	2	6	721	726	758	826	839	895	839	929	841	846
Florists		1		1	1							4	3	3	1	3		2			
Gardeners			2	2	4	9	2	2				21	20	22	20	26	23	24	23	22	17
II. Professional and Personal.																					
Actors and Actresses			2	1		1						4		2	3		3		1		
Architects				1			1	1				3	2	2		4	2	3			
Artists				2	1	1	1					5	1	4	5	2	3	3			
Authors													1	1	1				1		
Chemists														1				1			
Civil Engineers				1	1		2					4	1	3	1	10	2	1	1		
Clergymen			3	4	2	2	7	7				25	24	26	23	29	16	20	23	29	17
Dentists				1								25	1	10	5	6	5	6	2	7	5
Designers	1							1				2		2		2	4	1			
Draftsmen												1		2		1					
Electricians		2		1	1		1					1	4	3	3	2	3	2			
Inspectors		1			2	1	1					5	2			1	3	1	5		
Inventors																					
Journalists (inc. Ed's & Reporters)			1	1	1		2					5	6	1	1	4	3	6	6	7	
Lawyers		1	2	4	1	6	4	1			1	20	15	16	22	21	17	9	23	17	10
Musicians	1	1	1	3	2	2	1					10	9	7	12	10	6	6	6	11	5

TABLE XII.—CONTINUED.

OCCUPATIONS.	Age not stated.										Total, 1899.	Total, 1898.	Total, 1897.	Total, 1896.	Total, 1895.	Total, 1894.	Total, 1893.	Total, 1892.	Total, 1891.	Total, 1890.
	15 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.										
IV. Outdoor—Local.																				
Brickmasons.....	—	2	3	6	4	4	9	2	2	—	32	39	27	1	4	—	4	4	8	5
Brickmakers.....	—	—	1	—	—	—	—	1	—	—	2	1	3	—	6	—	—	1	6	3
Butchers.....	1	4	2	3	2	5	6	1	—	—	24	20	16	22	18	19	33	20	16	25
Carpenters.....	—	7	17	9	23	28	31	27	1	1	144	166	150	169	121	106	151	131	120	126
Charcoal Burners.....	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—
Marble Cutters.....	—	—	—	—	—	1	1	—	—	—	2	2	4	2	—	—	1	—	—	—
Millwrights.....	—	—	—	—	1	—	—	—	—	—	2	—	—	—	—	—	1	—	—	—
Quarrymen.....	—	—	3	3	1	—	3	1	—	—	11	4	5	3	4	8	20	8	10	4
Roofers.....	—	—	—	1	—	—	—	—	—	—	1	—	—	—	1	1	1	—	—	—
Slaters.....	—	1	1	1	—	—	—	—	—	—	2	—	1	1	—	1	1	—	—	—
Stonemasons.....	—	1	7	2	9	6	14	5	—	—	43	41	42	24	41	19	32	17	33	25
V. Indoor—Active.																				
Bakers.....	—	1	5	2	3	5	3	—	—	—	19	20	13	9	7	8	15	16	9	8
Blacksmiths.....	—	7	8	9	10	16	14	4	1	—	69	42	66	59	56	76	57	54	41	54
Boilermakers.....	—	—	—	1	—	1	1	—	—	—	3	4	3	6	1	2	3	—	—	—
Brassworkers.....	—	1	1	—	—	—	—	—	—	—	3	2	19	14	4	13	2	3	3	2
Brewers.....	—	—	—	1	2	—	—	—	—	—	3	—	—	2	2	1	1	4	2	2
Cabinetmakers.....	—	1	1	2	1	2	4	1	—	—	11	8	8	3	6	6	7	12	8	6
Carriage-makers.....	—	1	1	1	5	9	7	3	1	—	28	18	33	21	13	15	16	25	8	5
Cartridge-makers.....	—	—	—	—	—	—	—	—	—	—	—	6	9	—	—	—	2	—	—	—
Carvers.....	—	—	—	—	2	—	—	—	—	—	2	—	—	—	—	1	1	—	—	—
Caterers.....	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	1	—	—	—
Confectioners.....	—	—	—	—	—	—	—	—	—	—	—	1	1	2	—	—	5	7	2	1

Cooks and Housemaids.....	14	31	11	10	10	3	4	---	---	83	117	120	153	75	67	110	150	125	126
Coopers	---	---	---	---	2	1	---	1	---	5	1	3	3	9	5	5	3	5	2
Outlers	---	---	---	---	1	2	4	1	---	8	6	6	1	3	5	1	5	4	3
Dyers	1	1	1	1	2	4	---	1	---	10	1	3	3	6	3	5	9	6	8
Electrotypers	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	2	---
Gunsmitbs	---	---	2	3	3	1	---	---	---	6	8	2	5	3	2	7	4	6	4
Hatters	15	17	6	7	9	5	---	---	1	59	49	59	51	47	40	75	66	69	29
Lathers	---	---	---	1	1	---	---	---	---	1	5	2	2	---	---	1	---	---	---
Locksmiths	2	---	2	---	---	---	---	---	1	6	9	6	7	3	13	6	10	2	8
Machinists	1	18	8	9	14	18	12	3	---	83	92	83	89	78	64	81	76	71	73
Mechanics	4	24	22	21	9	19	24	11	---	134	130	146	168	151	137	160	154	177	117
Metalworkers	2	8	7	3	6	2	---	---	---	28	4	5	10	4	7	3	6	3	7
Miners	---	---	---	1	1	1	---	---	---	2	3	1	1	2	2	---	3	---	---
Moulders	2	6	10	17	8	5	3	4	---	56	49	48	53	38	25	43	39	41	56
Organmakers	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Painters	1	6	16	20	15	12	5	4	---	79	77	71	83	62	79	70	72	70	49
Papermakers	---	---	1	2	---	---	---	---	---	3	9	5	3	5	9	5	12	5	---
Patrumakers	1	---	---	---	---	---	3	2	---	6	9	3	6	4	9	5	---	---	---
Platers	2	1	---	2	---	---	1	---	---	6	3	4	4	5	2	5	6	---	---
Plasterers	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Plumbers	1	5	6	4	2	2	---	---	---	18	20	12	20	16	13	9	15	9	9
Sailmakers	---	---	---	---	---	1	---	---	---	1	1	---	---	---	2	---	2	1	1
Shipbuilders	---	---	1	1	1	4	4	2	---	11	10	1	1	3	---	4	4	3	2
Tanners	---	---	1	---	---	---	---	---	---	2	---	---	---	1	11	1	5	3	2
Tinsmiths	1	2	3	6	1	6	---	2	---	21	7	11	14	3	13	5	11	10	9
Upholsters	---	---	1	---	---	1	---	---	---	2	4	3	3	2	3	4	3	2	2
Weavers	4	9	6	4	3	7	2	---	---	35	32	27	26	30	23	28	21	29	15
Wheelwrights	---	---	---	---	2	2	---	1	---	3	7	3	1	---	4	3	6	1	3
Wiredrawers	1	---	2	---	---	---	---	---	---	3	7	4	5	5	4	2	6	3	3

VL Indoor—Activity Restricted.

Barbers	---	5	3	5	1	1	---	---	---	15	21	16	14	20	12	13	13	13	14
Bookbinders	---	---	---	---	1	1	---	1	---	4	3	2	1	2	5	2	2	---	---
Bookkeepers	1	9	5	2	3	6	2	3	---	30	33	34	44	27	25	33	16	24	16

TABLE XII—CONTINUED.

OCCUPATIONS.	Age not stated.										Total, 1899.	Total, 1898.	Total, 1897.	Total, 1896.	Total, 1895.	Total, 1894.	Total, 1893.	Total, 1892.	Total, 1891.	Total, 1890.
	15 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	100 and over.										
Bornmakers	1	2	3	1			1	1			9	3	2	1	8	1	4	3	3	2
Brassfinishers												6	6		2	3	6	2	2	2
Burnishers		1	4	1		1					7	36	9	2	4	5	6	7	4	7
Cigarmakers		2	4	3	1		2				16	16	5	10	10	12	13	13	9	10
Clerks and Salesmen	10	37	31	9	16	4	6				113	95	120	104	95	74	109	104	85	97
Clock and Watchmakers			2		3	2	1				1	9	12	9	6	7	4	8	6	10
Die-sinkers												2	3	1	1	3	1			3
Dressmakers		1	9	4	4	6	2	2	1		29	29	27	17	28	18	25	17	12	17
Factory Operatives	42	62	23	14	23	7	6	5	1	2	185	117	187	220	167	177	161	179	165	178
Furriers						1	1				2				1	2				
Grinders		1	1	1	5	1	1				10	22	3	2	10	9	9	7	7	14
Harnessmakers		1			3	1	2	1			8	14	11	12	11	8	12	15	14	8
Housekeepers	16	188	291	292	377	420	410	240	49	3	2299	2112	2160	2186	2074	1978	1968	2170	2007	1971
Engravers		1									1	8	1	1	1	5	8	2	3	2
Jewelers			1	1	3			1			6	6	3	2	3	5	6	6	5	
Laundry Workers		2	2	2	3		1				10	9	7		5	7	6	1	6	5
Milliners		2		1							3	4	5	2	5	4	8	4	5	1
Nurses		1	2	5	1	1	3		1		14	19	22	28	26	25	18	18	21	13
Printers		7	6		5	1	1				19	19	14	13	6	17	9	18	17	18
Rubber Workers	1	11	7	3	4	6	2				34	30	23	25	16	26	23	12	34	28
Shoemakers		4	2	3	6	10	13	9	3		50	39	42	46	30	63	54	69	54	50
Spinners		1	1	1							4	9	3		3	3	5	2	2	1
Tailors			2	3	4	8	13	1			22	18	30	32	87	28	23	38	27	26
Varishers					1	1	1				2				1	1		1	2	8
Woolsorters							1				3	5	1	7	7	1	2		2	1

TABLE XIII.
VITAL STATISTICS OF THE COLORED POPULATION BY COUNTIES.

COUNTIES.	BIRTHS.												MARRIAGES.												DEATHS.																	
	Sex not stated.						Average.						Sex not stated.						Male.						Sex not stated.						Male.						Average.					
	1880.	1887.	1888.	1889.	1890.	1899.	1880.	1887.	1888.	1889.	1890.	1899.	1880.	1887.	1888.	1889.	1890.	1899.	1880.	1887.	1888.	1889.	1890.	1899.	1880.	1887.	1888.	1889.	1890.	1899.	1880.	1887.	1888.	1889.	1890.	1899.						
Hartford.....	31	35	66	61	35	71	75	55	67	57	76	48	61.1	28	26	17	40	31	29	28	28	39	24	29.0	34	31	65	88	27	76	48	73	75	59	60	56	62.2					
New Haven.....	48	49	97	125	71	120	126	118	105	114	114	63	105.3	44	60	23	48	41	38	12	62	59	41	42.8	61	59	120	109	51	120	129	123	125	104	96	133	111.0					
New London.....	5	10	1	16	29	19	43	34	37	44	32	37	32.3	19	15	11	13	19	11	13	19	23	23	16.6	16	23	39	30	20	38	34	38	48	31	35	34	34.7					
Fairfield.....	26	24	50	62	40	70	66	63	62	63	60	50	57.6	30	38	12	42	38	40	27	31	30	23	31.6	37	40	77	67	42	79	76	61	76	69	55	62	68.4					
Windham.....	2	4	6	12	8	7	12	13	14	17	6	11	10.6	3	7	3	...	5	1	2	3	6	1	3.1	7	4	11	11	8	9	11	14	20	16	17	8	12.5					
Litchfield.....	7	4	11	24	13	12	15	16	18	16	14	10	14.9	4	6	5	11	9	6	7	8	5	10	7.1	10	8	18	20	8	16	17	22	19	27	26	29	20.2					
Middlesex.....	4	2	6	6	6	8	8	10	14	7	4	4	7.3	1	5	1	...	1	1	2	4	6	2	2.3	7	6	13	11	2	8	12	7	7	5	7	14	8.6					
Tolland.....	1	...	1	1	1	4	8	7	6	4	3	2	3.2	...	...	...	2	...	2	2	3	1	2	1.2	1	...	1	6	1	3	3	4	5	3	5	7	8.8		
Total.....	124	128	1,253	320	196	335	339	319	330	310	290	225	292.3	129	155	72	156	142	128	93	153	178	126	133.7	173	171	344	337	159	349	330	342	375	314	301	343	319.4					

NOTE.—In addition to the above there were mixed marriages: 6 in 1890; 5 in 1897; 8 in 1898; 13 in 1899; 10 in 1900; 4 in 1901; 6 in 1902; 7 in 1903; 8 in 1904.

TABLE XIV.
DEATHS FROM TYPHOID FEVER BY COUNTIES FOR A SERIES OF YEARS.
HARTFORD COUNTY.

TOWNS.	Estimated Population.	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
Hartford	77,085	32	36	20	30	38	32	28	46	39	30	26	26	8	21	21	28	12	30	27	13	11
Avon	1,200	...	...	...	1	1	1	3	1	...	...	...	...	...	1	1	...	1	1	...	...	...
Berlin	3,000	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bloomfield	1,400	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bristol	9,000	2	2	...	3	2	4	3	5	3	5	4	4	4	...	1	4	3	7	7	4	1
Burlington	1,200	...	...	...	...	...	2	...	...	...	...	...	...	...	...	1	2	2	2	2	...	...
Canton	2,690	...	...	...	...	...	...	...	1	...	...	3	1	1	4	4	2	7	...	...	...	8
East Granby	700	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
East Hartford	6,700	6	2	5	1	2	3	3	8	4	...	1	1	4	1	1	1	2	3	...	...	3
East Windsor	2,850	1	1	2	...	...	1	1	1	1	1	...	...	...	...	...	4	3	2	1	1	...
Enfield	8,000	...	1	3	1	1	4	1	4	2	3	5	3	...	3	5	4	1	...	...	4	...
Farmington	3,200	2	3	...	...	...	1	2	2	...	1	2	...	...	...	1	5	4	...	...	...	...
Glastonbury	3,600	1	...	...	...	...	1	1	1	...	3	6	1	...	...	7	1	...	1	2	1	...
Granby	1,250	...	...	1	...	...	...	...	1	...	...	...	...	...	1	1	...	1	...	...	...	...
Harland	600	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Manchester	10,000	2	1	2	1	2	4	3	9	4	2	1	1	1	...	...	2	4	2	6	5	1
Marlborough	425	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
New Britain	27,500	2	9	4	2	5	12	14	6	10	15	10	15	8	7	4	5	7	1	4	1	1
Newington	1,000	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Plainville	2,000	...	...	...	...	...	3	...	...	...	...	...	2	...	1	3	...	...	...	...	...	...
Rocky Hill	1,100	1	1	...	1	2	3	...	...	...	1	1	...	...	1	4	2	1	1	1	...	1
Simsbury	2,000	...	1	1	1	1	1	2	...	4	2	1	3	1	2	1	1	2	1	1	3	...
Southington	6,000	3	...	...	1	1	1	...	...	...	...	...	...	...	...	3	...	2	...	...	2	...
South Windsor	1,700	1	...	...	...	...	...	...	2	...	...	2	2	1	1	1	1	4	3	...	...	...
Suffield	3,300	...	...	...	1	1	1	1	2	...	...	...	...	...	...	3	...	...	...	...	...	...
West Hartford	2,900	...	2	1	1	...	...	4	1	1	...	...	...	...	1	2	...	...	2	1	1	1
Wethersfield	2,450	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Windsor	3,500	2	...	...	2	2	1	1	3	4	...	3	2	...	1	1	...	1	...	...	1	...
Windsor Locks	3,000	...	...	...	...	...	2	3	...	1	1	3	1	...	...	...	2	...	...	...	...	...

TABLE XIV—CONTINUED. NEW HAVEN COUNTY.

TOWNS.	Estimated Population	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
New Haven	116,500	30	36	26	28	32	28	28	26	18	24	24	38	24	25	17	42	33	24	28	18	12
Ansonia	12,940	1	3		1	6	2	3	8	12	1	2										
Beacon Falls	800																					
Bethany	500																					
Branford	5,000	2		2	2		4	1	1	5	4	1	1	1	1		2	5		1	4	
Cheshire	1,900																					
Derby	8,500	1	1	2	2	3		2	1		4	1	7	7	4	4	7	5	7	2	1	1
East Haven	1,400				1		1												2			
Guilford	2,875						1	1		1			4			1		1		1		1
Hamden	4,000	1	1		1	2	2	2	3		1	1	1	1	1	1	2	2	2	1	2	
Madison	1,500												11	3	6	9	9	8	9	14	5	5
Meriden	28,500	2	7	1	2	2	6	8	6	8	13	7		5	1	3	2	1	1	2		
Middlebury	600						1															
Milford	3,900		2						1		1	1	2		1	1	1	1	1	2	1	1
Naugatuck	10,000	5		1	3	4	3	2	1	3	4	5	8		1	4	1	5	14	2	2	1
North Branford	800	1														1	1	1				
North Haven	1,900											1	1	1	1	1	1	1		1		3
Orange	6,500	1	1			2		2	5	2	1	1	2		3							
Oxford	1,000			1		1	1					1								2		
Prospect	500							1							2							
Seymour	3,300				1		1		1		3	2	3						1	2	3	
Southbury	1,100		1															2	1	1		
Wallingford	9,000	2	2	1	2		3	7	1	6	2	2	2	2	1	4	5	2	3	4	2	1
Waterbury	50,000	15	13	13	19	18	16	14	29	22	43	11	13	8	19	13	20	41	13	8	5	
Wolcott	835								1			1	1	1	2							
Woodbridge	925						1	1											1			

TABLE XIV—CONTINUED. NEW LONDON COUNTY.

TOWNS.	Estimated Population.	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
New London	17,500	4	4	4	3	---	4	4	9	4	7	6	3	3	1	1	---	2	3	5	4	4
Bozrah	950	---	---	---	---	---	---	---	1	3	---	2	---	---	---	---	---	1	1	---	---	1
Colchester	2,500	---	1	---	---	---	1	---	---	---	2	1	3	1	---	---	1	4	5	3	---	1
East Lyme	2,200	---	1	---	1	---	1	---	1	6	---	---	---	---	---	2	1	---	---	---	2	3
Franklin	580	---	---	---	1	---	---	---	---	---	---	1	1	---	---	---	---	1	---	---	---	---
Griswold	4,200	---	1	---	2	1	1	---	---	1	---	1	1	---	1	1	1	1	3	3	3	1
Groton	7,000	3	1	---	2	---	2	4	---	2	---	1	2	---	1	---	---	1	4	2	5	5
Lebanon	1,650	---	---	---	---	---	2	---	---	---	---	1	---	---	1	---	1	---	---	---	---	1
Ledyard	1,050	1	1	---	1	---	1	2	2	1	2	1	---	---	---	---	1	---	---	---	---	---
Lisbon	635	2	---	---	---	---	---	1	---	---	---	---	---	---	---	---	1	---	---	---	---	---
Lyme	940	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	1	---	---
Montville	3,000	---	---	---	---	---	---	3	---	---	1	1	---	---	---	1	---	---	---	---	---	---
Norwich	25,500	1	3	3	8	5	2	5	4	3	5	8	1	3	5	13	12	12	12	6	2	1
North Stonington	1,500	---	---	---	1	---	---	---	1	---	1	1	---	---	1	---	1	2	---	---	---	---
Old Lyme	1,330	---	---	---	---	---	2	---	1	---	---	1	1	---	---	---	---	---	---	---	---	---
Preston	2,560	---	---	---	---	---	---	---	---	1	---	---	---	1	---	---	2	1	1	---	---	---
Salem	481	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Sprague	1,200	---	1	---	---	---	1	---	---	---	---	---	---	1	1	---	---	2	2	1	---	1
Stonington	8,000	2	2	1	3	---	3	4	8	2	2	---	3	2	1	1	1	1	3	1	6	6
Voluntown	1,000	---	---	---	---	---	2	---	---	1	---	---	1	---	1	---	1	---	---	---	---	---
Waterford	3,175	2	1	---	1	1	1	---	1	---	4	2	---	1	1	---	---	---	---	---	---	---

TABLE XIV—CONTINUED. FAIRFIELD COUNTY.

TOWNS.		Estimated Population	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
Danbury		19,368	2	3	3	9	10	1	9	16	12	8	22	8	7	10	1	4	3	3	3	4	1
Bridgeport		66,757	8	8	14	11	6	2	12	7	8	3	8	8	17	12	11	2	9	13	10	11	
Bethel		3,600			1	2	1	5	4	3	4	2	1	2	3	1			1	1	1		
Brookfield		950						1			1	2		1					3	1			
Darien		2,420	1				1				2											4	
Easton		1,000					1																
Fairfield		3,900							1							2	1			2			
Greenwich		13,000	2	3	2		5		2	3		5	3	4	1	2	4	1	3	1		3	
Huntington		6,000	3			1	2	1	5	1	1	2	2	1	1	2	1	2	1	2			
Monroe		950					1																
New Canaan		3,000			1	1	1	1				2	1					2	3	3	3	1	
New Fairfield		650		1						1	2	1						1					
Newtown		3,350					1	2					2					1		4	2	1	
Norwalk		23,000	3	1	3		4	2	4	6	9	9	4	2	2	2	3	2	2	6	4	1	
Redding		1,500	2	1				1			1	1	2			1		2	2	2	1	1	
Ridgefield		2,500	1				1			2	2				1			1					
Sherman		650				1		2	1			1											
Stamford		19,000	1	4	2	5	36	1	3	5	5	5	8	1	2	2	3		6	10	1	3	
Stratford		3,300					1			1				2	3	3	1	1	1	3			
Trumbull		1,500	1				1	1					1								3	2	
Weston		800			1									1									
Westport		3,500	1				2	1	1		2		1		1	2			1	1			
Wilton		1,700					1						1	2	1	1	1	1	2	2		1	

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TABLE XIV—CONTINUED. WINDHAM COUNTY.

TOWNS.	Estimated Population.	1869.	1868.	1867.	1866.	1865.	1864.	1863.	1862.	1861.	1860.	1879.
Brooklyn.....	2,428	—	—	—	—	—	—	—	—	—	—	—
Ashford.....	675	—	—	—	—	—	—	—	—	—	—	—
Canterbury.....	800	—	—	—	—	—	—	—	—	—	—	—
Chaplin.....	550	1	—	—	—	—	—	—	—	—	—	—
Eastford.....	600	—	—	—	—	—	—	—	—	—	—	—
Hampton.....	680	—	—	—	—	—	—	—	—	—	—	—
Killingly.....	7,000	2	—	—	—	—	—	—	—	—	—	—
Plainfield.....	5,000	1	1	—	—	—	—	—	—	—	—	—
Pomfret.....	1,500	—	—	—	—	—	—	—	—	—	—	—
Putnam.....	9,800	1	—	—	—	—	—	—	—	—	—	—
Scotland.....	475	—	—	—	—	—	—	—	—	—	—	—
Sterling.....	1,050	—	—	—	—	—	—	—	—	—	—	—
Thompson.....	5,620	—	—	—	—	—	—	—	—	—	—	—
Windham.....	10,000	—	—	—	—	—	—	—	—	—	—	—
Woodstock.....	2,300	1	—	—	—	—	—	—	—	—	—	—

TABLE XIV—CONTINUED. LITCHFIELD COUNTY.

TOWNS.	Estimated Population.	1899.	1898.	1897.	1896.	1896.	1896.	1896.	1899.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
Litchfield	3,500	---	2	---	1	3	---	---	---	---	---	---	---	---	1	---	---	2	---	---	---
Barkhamsted	1,050	---	---	---	1	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Bethlehem	580	---	---	---	---	---	2	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Bridgewater	650	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Canaan	800	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Colebrook	850	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Cornwall	1,200	---	---	---	---	2	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Goshen	920	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Harwinton	1,200	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Kent	1,200	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Morris	600	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
New Hartford	3,200	---	2	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
New Milford	4,035	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Norfolk	1,425	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
North Canaan	1,600	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Plymouth	2,300	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Roxbury	850	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Salisbury	3,500	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Sharon	2,300	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Thomaston	3,500	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Torrington	12,054	---	3	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Warren	450	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Washington	2,000	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Watertown	3,100	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Winchester	8,000	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
Woodbury	1,900	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

TABLE XIV.—CONTINUED. MIDDLESEX COUNTY.

TOWNS.	Estimated Population.	1899.	1898.	1897.	1896.	1896.	1896.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
Middletown	20,000	3	3	2	5	2	4	9	4	5	21	1	1	4	1	1	1	6	2	2	2	5	6	2
Haddam	1,900	—	1	1	2	2	—	1	3	1	1	1	1	3	4	1	1	1	1	1	1	1	1	1
Chatham	2,300	—	—	—	1	—	—	—	—	—	3	—	—	—	—	3	2	2	1	1	1	1	1	1
Chester	1,300	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	1	1	1	1	1	1	1
Clinton	1,400	—	—	2	—	—	—	—	1	2	1	1	1	1	—	—	1	1	1	2	2	—	2	2
Gromwell	2,000	—	—	—	1	—	2	2	3	1	2	4	1	1	1	2	1	1	1	2	2	—	1	1
Durham	850	—	—	—	—	—	—	1	1	1	1	1	1	1	1	1	2	1	1	2	2	1	1	1
East Haddam	2,600	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	3	1	1	1
Essex	2,300	—	—	—	—	—	—	1	1	1	1	—	—	—	—	—	—	1	1	1	3	1	1	1
Killingworth	700	—	—	—	—	—	—	1	1	1	1	—	—	—	—	—	—	—	—	—	1	1	1	1
Middlefield	1,000	—	—	—	—	1	—	—	1	3	1	—	—	—	—	—	—	1	1	1	1	1	1	1
Old Saybrook	1,500	—	1	—	1	—	2	—	1	2	—	—	—	—	—	—	—	1	1	1	1	1	1	1
Portland	4,700	—	1	—	—	1	3	—	2	2	1	2	6	6	6	4	1	3	2	2	6	1	2	2
Saybrook	1,500	—	—	—	—	—	—	1	1	—	3	2	1	2	5	4	1	3	2	1	1	1	1	1
Westbrook	850	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	1	1	1	2	3	1	1

TABLE XIV—CONTINUED. TOLLAND COUNTY.

TOWNS.	Estimated Population.	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.	1889.	1888.	1887.	1886.	1885.	1884.	1883.	1882.	1881.	1880.	1879.
Tolland	1,120	—	—	—	—	1	1	—	—	1	—	1	—	2	—	1	—	1	2	1	—	—
Andover	406	—	—	—	—	—	—	2	—	—	—	2	—	—	—	—	1	—	1	1	—	—
Bolton	500	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	1	—	—	—
Columbia	730	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Coventry	1,750	—	—	1	—	—	1	—	—	—	—	2	—	1	—	—	2	3	3	—	—	—
Ellington	1,700	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Hebron	1,000	1	—	—	1	—	—	—	—	1	1	1	—	1	—	—	—	1	1	1	1	—
Mansfield	1,911	—	—	—	—	1	2	—	—	—	—	—	—	1	—	2	2	2	2	—	3	1
Somers	1,500	—	2	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Stafford	4,615	2	2	2	2	1	2	2	1	2	7	4	1	2	—	1	7	4	7	3	3	2
Union	425	—	—	—	—	—	—	—	—	1	—	—	—	—	6	1	1	1	1	1	—	2
Vernon	9,500	—	1	3	—	1	—	2	6	5	—	—	—	—	2	2	3	7	6	6	2	4
Willington	909	—	—	—	—	—	—	—	—	—	—	—	3	1	2	—	—	—	—	—	2	1

BIRTHS, 1899.

There were registered during the year 1899, in the State of Connecticut, 20,855 births, of which 19,944 were born alive and 911 were still-born.

As compared with the year before, there were 168 less living births and 5 less still-births reported.

Of the whole number of births of which the sex was certified, 10,739 were males, 10,026 were females, while in regard to 90 the sex was not stated.

Of the sexes registered, the proportion of boys to girls was 107.1 to 100 girls, against 108.4 the previous year.

New Haven County had the largest birth-rate, viz: 25.4, and foreign-born parents, to wit, 48.5 per cent.

Middlesex County had the lowest birth-rate, 17.2.

Of Hartford County, 44.2 per cent. were of foreign-born parents.

Of New London County, 35.8 per cent. were of foreign-born parents.

Of Fairfield County, 41.9 per cent. were of foreign-born parents.

Of Windham County, 38.1 per cent. were of foreign-born parents.

Of Litchfield County, 34.4 per cent. were of foreign-born parents.

Of Middlesex County, 35.0 per cent. were of foreign-born parents.

Of Tolland County, 32.9 per cent. were of foreign-born parents.

Of the State, 43.0 per cent. were registered as both parents foreign-born and 39.7 per cent. of native parents; there were 15.7 per cent. of one native and one foreign-born parent, while 1.4 per cent. of the nationality of parents was not stated.

The proportions of births to the whole estimated population of the State (viz., 912,159) was 1 to 43.7 of the population, or 22.6 per thousand.

The town having the highest birth-rate is in New Haven County, namely, Branford, 35.6.

The greatest number of births in any one month occurred in July, 1,909 : the smallest number in February, 1,572.

The largest number of males were born in September, 981 ; the largest number of females were born in July, 936.

In the first quarter of the year the birth-rate was 22.7.

In the second quarter of the year the birth-rate was 21.0.

In the third quarter of the year the birth-rate was 24.5.

In the fourth quarter of the year the birth-rate was 23.1.

In Hartford County the town having the highest birth-rate was Windsor Locks, 29.7. East Granby had the lowest birth-rate, 8.5.

In New Haven County the town having the highest birth-rate was Branford, 35.6. Woodbridge had the lowest birth-rate, 10.7.

In New London County the town having the highest birth-rate was Griswold, 30.2. Colchester had the lowest birth-rate, 10.0.

In Fairfield County the town having the highest birth-rate was Bridgeport, 29.1. Easton had the lowest birth-rate, 10.0.

In Windham County the town having the highest birth-rate was Pomfret, 31.3. The lowest was in Scotland, 6.3.

Litchfield County's highest was Plymouth, 34.8 ; and the lowest was Colebrook, 10.6.

In Middlesex County Cromwell took the lead, birth-rate 25.5 ; and Clinton was lowest, 10.0.

In Tolland County, Hebron, 30.0, and Coventry, 11.5.

The registered number of still-births in the State was 911, which is one to every 21.6 of living births.

There were 478 males, 373 females and 39 sex not stated ; 10 males, 10 females and 1 sex not stated were colored.

TABLE XV.—SHOWING AMERICAN AND FOREIGN PARENTAGE OF BIRTHS BY COUNTIES, 1899.

COUNTIES.	PARENTS.				Nativity of Parents not stated.	Total.
	Both American.	Both Foreign.	Father For., Mother Am.	Father Am., Mother For.		
Hartford	1,730	1,939	341	329	44	4,383
New Haven	2,467	3,394	579	501	43	6,984
New London	821	634	155	144	16	1,770
Fairfield	1,610	1,738	315	327	154	4,144
Windham	399	374	85	105	17	980
Litchfield	681	463	97	92	12	1,345
Middlesex	385	272	54	63	1	775
Tolland	206	156	52	51	9	474
Total	8,299	8,970	1,678	1,612	296	20,855

TABLE XVI.—SHOWING NATIVITY OF PARENTAGE AND PERCENTAGE.

Years.	American Parents.	Per cent.	Foreign Parents.	Per cent.	Foreign American.	Per cent.	Not stated.	Per cent.	Total Births.
1899	8,299	39.7	8,970	43.0	3,290	15.7	296	1.4	20,855
1898	8,496	40.4	8,781	41.7	3,395	16.1	351	1.6	21,023
1897	8,425	40.9	8,687	42.2	3,246	15.7	222	1.0	20,580
1896	8,789	41.2	9,079	42.5	3,316	15.5	140	0.6	21,324
1895	8,268	41.4	8,258	41.4	3,154	15.8	251	1.2	19,931
1894	8,510	43.2	8,380	41.1	3,196	15.7	259	1.3	20,345
1893	8,487	41.8	8,298	40.8	3,169	15.6	342	1.6	20,296
1892	8,346	42.2	7,907	40.0	3,120	15.7	377	1.9	19,750
1891	8,074	43.5	7,268	39.1	2,881	15.5	335	1.8	18,558
1890	7,596	43.6	6,528	37.5	2,770	15.9	500	2.8	17,394

TABLE XVII.—ILLEGITIMATE BIRTHS BY MONTHS AND SEX, 1899.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Males.....	7	9	8	6	11	6	6	13	7	10	6	10	99
Females.....	12	12	18	14	10	6	6	7	5	11	5	4	110
Total.....	19	21	26	20	21	12	12	20	12	21	11	14	209

TABLE XVIII.—TWIN BIRTHS BY MONTHS AND SEX, 1899.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Males.....	18	6	27	26	13	19	18	25	17	9	18	29	225
Females.....	21	8	29	20	15	24	25	17	11	11	16	15	212
Total.....	39	14	56	46	28	43	43	42	28	20	34	44	437

BIRTH RATE, 1899.
DIAGRAM A, SHOWING THE NUMBER OF BIRTHS TO EACH 1,000 OF THE POPULATION BY COUNTIES.

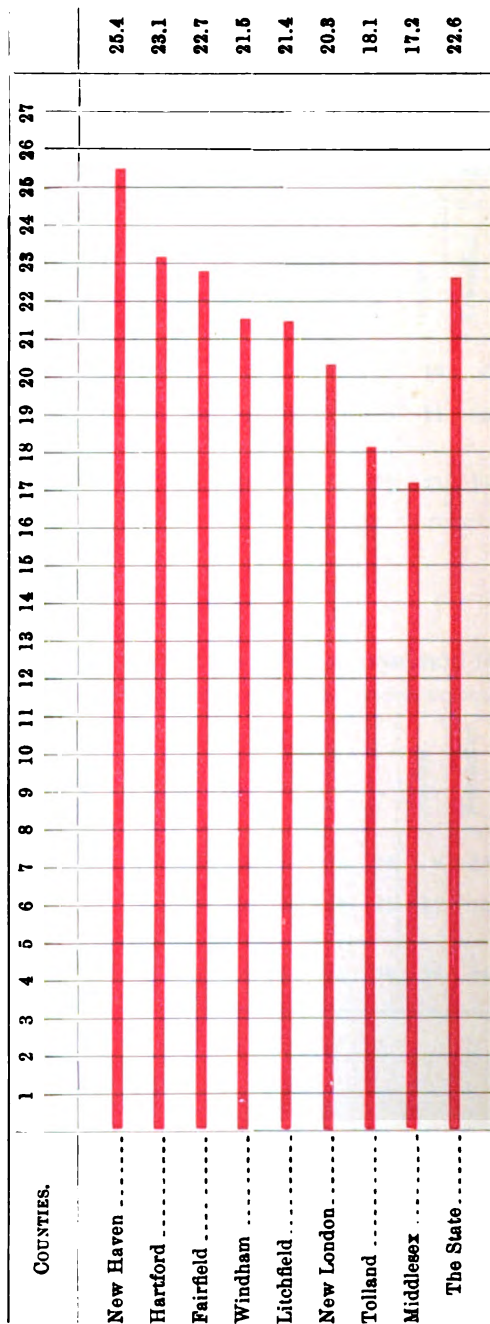


DIAGRAM B, SHOWING THE RATE OF BIRTHS TO EACH 1000 OF THE POPULATION IN EVERY TOWN OF OVER 5000 INHABITANTS, AND OF THE REMAINDER OF THE STATE.

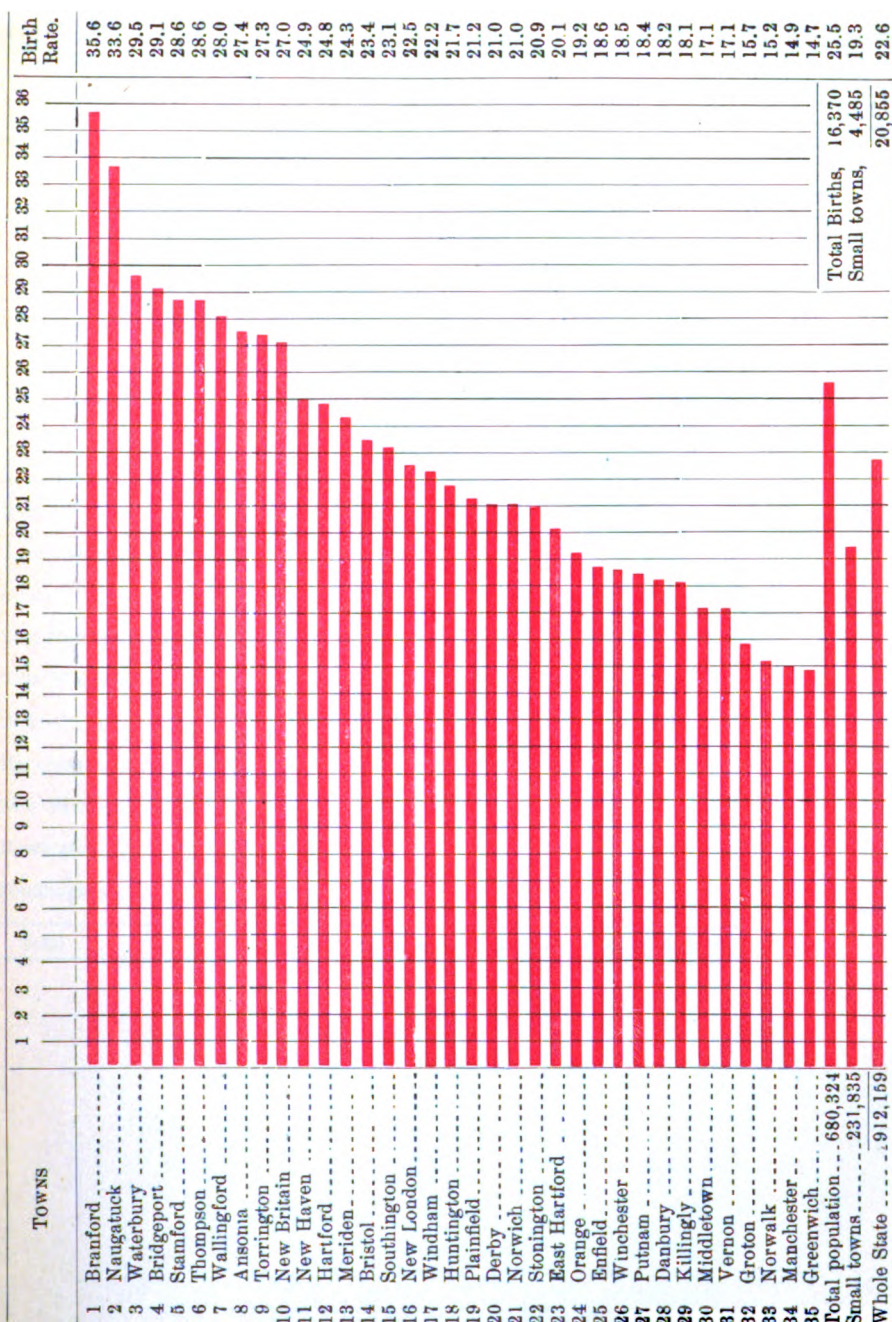


TABLE XIX.—PLURALITY BIRTHS, 1899. BY TOWNS.

(Included in Tables I, II, III.)

HARTFORD COUNTY.

TOWNS.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Hartford	Males .....	..	..	3	5	..	..	3	2	4	2	2	2	23
	Females	2	..	1	3	2	..	5	2	..	2	..	..	17
Bloomfield	Males .....	..	..	..	..	..	..	..	..	..	..	..	..	2
	Females .....	..	..	2	..	..	..	..	..	..	..	..	..	..
Bristol	Males .....	..	1	..	..	..	..	..	..	..	..	..	..	1
	Females .....	..	1	..	..	..	..	..	..	..	..	..	..	1
East Hartford	Males .....	..	2	..	..	..	..	..	..	..	..	..	..	2
	Females	2	..	2	..	..	..	2	..	..	..	..	..	6
East Windsor	Males .....	..	..	..	1	..	..	1	..	..	..	2	..	4
	Females .....	..	..	..	1	..	..	1	..	..	..	..	..	2
Enfield	Males	2	..	..	..	..	..	..	..	..	..	..	..	2
	Females	1	..	..	..	..	..	..	..	..	..	..	..	1
Manchester	Males .....	..	..	..	..	..	..	..	..	..	..	..	..	..
	Females .....	..	..	..	..	..	..	..	..	..	..	2	..	2
New Britain	Males .....	..	..	1	..	..	..	..	..	..	1	2	..	4
	Females	2	..	1	2	..	..	2	..	..	3	..	..	10
Newington	Males .....	..	..	..	..	..	..	..	1	..	..	..	..	1
	Females .....	..	..	..	..	..	..	..	1	..	..	..	..	1
Southington	Males .....	..	..	..	..	..	..	..	..	..	..	..	..	..
	Females .....	..	..	..	..	..	..	..	..	..	..	2	..	2
Total .....	.....	9	4	10	12	2	..	10	8	6	4	6	10	81

TABLE XIX—CONTINUED. NEW HAVEN COUNTY.

TOWNS.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
New Haven	Males	1	1	6	4	3	6			2	1	3	2	29
	Females	1	1	4	2	3	1	8	2		7	1		30
Ansonia	Males						1							1
	Females						1							1
Branford	Males						1	2	2					5
	Females				2		1							3
Cheshire	Males													
	Females				2	2								4
Derby	Males				4									4
	Females													
East Haven	Males					2								2
	Females													
Hamden	Males									1				1
	Females									1				1
Madison	Males											2		2
	Females													
Meriden	Males	2			2	1		2	2		2			11
	Females			2		1						4	4	11
Naugatuck	Males					1			1				1	3
	Females					1			1				1	3
North Haven	Males												1	1
	Females												1	1
Orange	Males			1										1
	Females			3										3
Seymour	Males									1				1
	Females									1				1
Wallingford	Males													
	Females	2		2			2							6
Waterbury	Males			3					2			1	2	8
	Females			1	2		4	2		2		1		12
Total		6	2	22	18	14	17	14	10	8	10	12	12	145

NEW LONDON COUNTY.

New London	Males					1								1
	Females					2	1			2				5
Colchester	Males													
	Females	2												2
Griswold	Males	1				1						3		5
	Females	1				1						1		3
Lebanon	Males		1											1
	Females		1											1
Ledyard	Males					2								2
	Females													
Lisbon	Males					1								1
	Females					1								1
Norwich	Males	1												1
	Females	1				2		2						5
Old Lyme	Males					2								2
	Females													
Preston	Males							2						2
	Females													
Stonington	Males													
	Females					2								2
Voluntown	Males													
	Females								2					2
Waterford	Males							2						2
	Females													
Total		6	2			6	10	4	2	4			4	38

TABLE XIX—CONTINUED. FAIRFIELD COUNTY.

TOWNS.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Danbury	Males			2			1				2			5
	Females						1							1
Bridgeport	Males			3	3	2		2	5	1		1	2	19
	Females		2	5	1				3	3		1	2	17
Darien	Males			2										2
	Females													
Fairfield	Males							2	1					3
	Females							2	1					3
Greenwich	Males	1										2		3
	Females	1												1
Newtown	Males							2						2
	Females													
Norwalk	Males						1			1				2
	Females						1	3		1				5
Stamford	Males	1												1
	Females	1					2							3
Stratford	Males											1	2	3
	Females											1		1
Weston	Males									2				2
	Females													
Westport	Males			1										1
	Females			1										1
Wilton	Males								2					2
	Females								1					
Total		4	2	14	4	2	6	11	12	8	2	4	8	77

WINDHAM COUNTY.

Canterbury	Males	2												2
Eastford	Females										2			2
Hampton	Females			2										2
Plainfield	Males					2					2			4
Pomfret	Males				1									1
	Females				1									1
Putnam	Females				2									2
Sterling	Males											1		1
	Females											1		1
Thompson	Females						2							2
Windham	Males							2				1		3
	Females							2				1		3
Total		2		2	4	2	2		4			6	2	24

TABLE XIX—CONTINUED. LITCHFIELD COUNTY.

TOWNS.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Litchfield	Males	2							1					3
	Females						2		1					3
Cornwall	Males			2										2
	Females													
Harwinton	Males	2												2
	Females													
New Hartford	Males	2										1		3
	Females											1		1
North Canaan	Males						2							2
	Females													
Torrington	Males				2							2		4
	Females				2			2						4
Watertown	Males										1			1
	Females										1			1
Total		6		2	4		4	2	2		2		4	26

MIDDLESEX COUNTY.

Middletown	Males				4							4		8
	Females	2			2									4
Haddam	Males		1											1
	Females		1											1
Chatham	Males	1												1
	Females	1												1
Cromwell	Males			1										1
	Females			1										1
Durham	Males											2		2
	Females													
Old Saybrook	Males													
	Females								2					2
Portland	Males							1			1			2
	Females		2					1		1				4
Saybrook	Males										1			1
	Females										1			1
Total		4	4	2	4	2			2	2	2	4	4	30

TOLLAND COUNTY.

Andover	Males													
	Females			2										2
Coventry	Males							1						1
	Females							1						1
Somers	Males													
	Females	2												2
Stafford	Males			2		2		1						5
	Females							1						1
Vernon	Males										1			1
	Females					2					1			3
Total		2		4		4	2	2			2			16

TABLE XX.—PLURALITY BIRTHS, 1899, BY COUNTIES.

(Included in Tables I, II, III, IV.)

COUNTIES.	SEX.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTAL.
Hartford	Males	2	3	4	6	...	...	3	3	5	2	3	6	37
	Females	7	1	6	6	2	...	7	5	1	2	3	4	44
	Total	9	4	10	12	2	...	10	8	6	4	6	10	81
New Haven	Males	3	1	10	10	7	8	4	7	4	3	6	6	69
	Females	3	1	12	8	7	9	10	3	4	7	6	6	76
	Total	6	2	22	18	14	17	14	10	8	10	12	12	145
New London	Males	2	1	...	...	2	5	4	2	4	...	3	...	23
	Females	4	1	...	...	4	5	...	...	...	...	1	...	15
	Total	6	2	...	...	6	10	4	2	4	...	4	...	38
Fairfield	Males	2	...	8	3	2	2	6	8	4	2	2	6	45
	Females	2	2	6	1	...	4	5	4	4	...	2	2	32
	Total	4	2	14	4	2	6	11	12	8	2	4	8	77
Windham	Males	2	...	...	1	2	...	...	2	...	3	1	...	11
	Females .....	...	...	2	3	...	2	...	2	...	3	1	...	13
	Total	2	...	2	4	2	2	...	4	...	6	2	...	24
Litchfield	Males	6	...	2	2	...	2	...	1	...	1	...	3	17
	Females .....	...	...	...	2	...	2	2	1	...	1	...	1	9
	Total	6	...	2	4	...	4	2	2	...	2	...	4	26
Middlesex	Males	1	1	1	4	...	...	...	1	...	1	3	4	16
	Females	3	3	1	...	2	...	...	1	2	1	1	...	14
	Total	4	4	2	4	2	...	...	2	2	2	4	4	30
Tolland	Males .....	...	...	2	...	...	2	1	1	...	1	...	...	7
	Females	2	...	2	...	...	2	1	1	...	1	...	...	9
	Total	2	...	4	...	...	4	2	2	...	2	...	...	16
Grand Total		39	14	56	46	28	43	43	42	28	20	34	44	437

TABLE XXI.—TWINS AND ILLEGITIMATE BIRTHS BY COUNTIES FOR THE PAST TEN YEARS, WITH SEXES FOR 1899.

COUNTIES.	1899.						1898.		1897.		1896.		1895.		1894.		1893.		1892.		1891.		1890.		TOTAL FOR 10 YEARS.		AVERAGE FOR 10 YEARS.	
	TWINS.			ILLEGIT.			Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.	Twins.	Illegitimate.
	Males.	Females.	Total.	Males.	Females.	Total.																						
Hartford	37 44	*81 27	26 53	94 25	66 47	*99 47	64 36	58 41	*73 44	78 40	*81 39	*51 49	745 421	74.5 42.1														
New Haven	69 76	*145 35	38 73	169 63	*153 63	154 77	132 64	184 48	84 53	114 61	†92 67	110 42	1337 611	133.7 61.1														
New London	23 15	38 6	7 13	49 15	34 19	44 29	40 19	32 19	*49 24	34 16	32 17	30 14	382 185	38.2 18.5														
Fairfield	45 32	*77 10	20 30	84 36	78 37	†104 21	76 27	60 27	72 49	*93 43	58 30	*63 27	765 327	76.5 32.7														
Windham	11 13	24 7	3 10	18 4	*28 13	22 6	16 7	24 13	4 10	18 8	4 5	6 12	159 88	15.9 8.8														
Litchfield	17 9	26 9	7 16	20 15	26 14	16 13	*15 6	32 10	12 15	24 5	30 14	16 8	217 116	21.7 11.6														
Middlesex	16 14	30 2	3 5	10 7	20 7	22 9	13 7	18 5	28 8	22 10	12 7	14 7	189 72	18.9 7.2														
Tolland	7 9	16 3	6 9	14 3	8 6	4 6	10 6	18 3	10 5	18 13	10 6	10 6	118 63	11.8 6.3														
Total	225 212	437 99	110 209	468 168	408 206	465 208	366 172	426 166	332 208	401 196	319 185	300 165	3912 1883	391.2 188.3														

* Includes one set of triplets.

† Includes two sets of triplets.

‡ Includes one set of quadruplets.

The following table exhibits the rate of illegitimate births to every 1,000 by counties :

Hartford County,	12.0	to	1,000	births.
New Haven	"	10.4	"	"
New London	"	7.3	"	"
Fairfield	"	7.2	"	"
Windham	"	10.2	"	"
Litchfield	"	11.8	"	"
Middlesex	"	6.4	"	"
Tolland	"	18.9	"	"
Total,		10.0	"	"

TABLE XXII.—STILL-BIRTHS, 1899.

WHITE.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mo. not stated.	Total.
Males.....	48	36	33	40	41	33	39	40	46	40	39	43	---	478
Females.....	36	18	41	36	25	32	46	24	31	27	28	29	---	373
Sex not stated	1	3	4	1	4	4	6	2	6	4	2	1	1	39
COLORED.														
Males.....	1	1	2	---	---	---	1	2	1	1	1	---	---	10
Females.....	1	3	1	2	---	1	---	1	1	---	---	---	---	10
Sex not stated	---	---	---	---	---	1	---	---	---	---	---	---	---	1
Grand Total	87	61	81	79	70	71	92	69	85	72	70	73	1	911

The following number of certificates were received from the towns mentioned too late for tabulation :

	1899.												Mo. not stated.
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	
Bethlehem (Birth)		1											
" (Marriage)			1										
Bridgeport (Birth)										1			
Colebrook "												1	
Newtown "					1								
Sterling "							1						
Torrington "								1	1				
West Hartford (Birth)							1				1		
Totals, 9 Births, 1 Marriage.													

TABLE XXIII.—SHOWING A NATIONALITY OF PARENTS BY COUNTIES.

COUNTIES.	American.	Irish.	English.	German.	Canadian.	Scottish.	Welsh.	French.	Spanish.	Italian.	Swiss.	Austrian.	Belgian.	Hungarian.	Prussian.	Bohemian.	Danish.	Swedish.	Polish.	Norwegian.	Finland.	Russian.	Portuguese.	Newfoundland.	American and Foreign.	Mixed Foreign.	Other Foreign Countries.	Not stated.	Total.	
Hartford	1730	430	72	185	111	18	---	6	---	246	4	48	---	12	1	3	32	304	37	---	---	---	257	4	6	670	147	17	44	4383
New Haven	2467	785	114	344	211	30	5	4	---	707	11	61	---	36	8	3	27	227	58	6	18	428	2	4	1080	279	27	43	6984	
New London	821	122	23	68	147	15	3	1	---	32	---	9	---	---	---	---	3	17	30	1	9	70	17	---	---	299	59	8	16	1770
Fairfield	1610	341	90	152	23	8	---	6	---	208	3	168	---	280	3	4	15	139	16	6	2	88	---	---	---	642	173	13	154	4144
Windham	399	29	6	5	268	4	---	1	---	1	---	---	---	---	---	---	---	37	---	---	---	3	---	---	---	190	17	2	17	980
Litchfield	681	72	26	52	37	7	---	22	---	30	7	33	1	9	---	---	2	42	44	---	---	40	---	---	---	189	24	16	12	1345
Middlesex	385	32	11	25	8	3	---	1	---	20	---	8	---	---	---	---	3	83	13	1	1	27	---	---	---	117	35	1	1	775
Tolland	206	7	16	39	25	1	1	---	---	8	1	11	---	---	1	---	---	4	10	1	---	13	---	---	---	103	17	1	9	474
Total, 1899	8299	1818	358	870	830	86	9	40	---	1252	26	339	1	1337	13	10	82	853	208	14	30	926	23	10	3290	751	84	296	20855	
1898	8496	1916	311	961	829	88	6	42	3	1080	32	363	1	266	13	16	86	772	324	16	25	783	29	7	3395	775	37	351	21023	
1897	8425	912	195	524	404	47	2	27	---	456	36	26	---	20	3	3	29	854	32	4	16	468	11	4	3248	725	4377	214	20680	
1896	8791	2111	429	1172	947	92	4	34	---	882	29	93	2	54	1	5	86	850	133	7	5	890	24	7	3314	693	519	140	21324	
1895	8268	2031	393	1131	853	118	5	48	---	755	19	59	1	61	4	6	73	728	93	8	16	795	24	---	2	3157	848	184	251	19931
1894	8510	2121	439	1166	939	127	5	42	1	704	23	280	2	56	5	1	74	744	80	10	8	657	24	9	3196	685	168	259	20345	
1893	8487	2162	453	1216	964	136	7	48	2	643	17	286	---	34	3	3	89	729	61	6	9	654	22	---	---	3169	625	129	342	20296
1892	8372	2168	169	1208	1005	123	9	49	---	590	20	143	---	99	8	11	79	649	57	10	14	532	19	---	---	3120	615	67	324	19750
1891	8074	2161	424	1140	862	97	9	39	---	458	24	175	2	70	---	10	34	540	63	12	12	377	18	---	5	2881	638	98	355	18557
1890	7596	2021	410	1093	846	131	11	20	1	322	20	112	---	53	6	13	66	504	45	7	6	249	11	3	2770	545	33	500	17394	

TABLE XXIV.—BIRTH-RATE BY COUNTIES FOR 10 YEARS.

COUNTIES.	YEARS.									
	1899	1898	1897	1896	1895	1894	1893	1892	1891	1890
Hartford	23.1	23.4	23.0	24.4	24.1	24.1	25.4	23.9	23.7	21.8
New Haven	25.4	26.7	26.6	27.7	28.4	28.6	29.5	28.7	28.6	26.7
New London	20.3	21.7	21.1	22.8	21.6	22.0	22.5	21.9	21.7	20.4
Fairfield	22.7	23.2	22.8	25.8	23.2	24.9	25.6	25.4	25.8	24.6
Windham	21.5	21.7	21.9	25.4	21.8	25.9	22.1	23.6	21.8	21.9
Litchfield	21.4	20.2	21.1	20.4	20.2	21.0	19.5	19.1	20.2	19.1
Middlesex	17.2	17.5	18.1	18.3	21.2	20.3	21.4	20.0	22.7	20.1
Tolland	18.1	21.4	18.5	21.2	20.4	20.2	22.6	22.1	21.8	20.6
State of Connecticut	22.6	23.5	23.3	24.9	24.4	24.9	25.4	24.7	24.8	23.3

MARRIAGES.

There were 6,843 marriages registered during the year 1899, being 278 more than in 1898.

This is one marriage to every 133.2 of the living population, or a marriage rate of 7.5 per 1,000, or 15.0 persons to a 1,000.

TABLE XXV.—MARRIAGES.

BRIDES.	12 to 15.	15 to 20.	20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	Age not stated.	TOTAL.
First Marriage	3	887	4,584	560	89	15	2			5	6,145
Second "			197	241	120	48	8	3		4	621
Third "				11	11	6	3			1	32
Fourth "					1						1
Number not stated		1	23	8	8	1				3	44
Total, 1899	3	888	4,804	820	229	70	13	3		13	6,843
1898	3	846	4,616	749	250	61	24	4		12	6,565
1897	2	866	4,467	778	219	81	27	6		15	6,461
1896	1	956	4,665	760	219	71	21	1		20	6,714
1895	1	1,034	4,467	766	242	84	24	3	1	1	6,623
1894	2	862	3,983	671	213	75	22	2			5,830
1893	1	993	4,418	742	202	73	22	4		4	6,459
1892	1	1,014	4,517	761	206	47	45	4		1	6,596
1891	1	998	4,460	749	190	71	22	3			6,494
1890	1	939	4,325	735	188	72	18	4		2	6,284
GROOMS.											
First Marriage		97	4,562	1,141	142	15	4	1		2	5,964
Second "			102	303	212	108	47	13	1	1	787
Third "			2	10	19	10	11	5			57
Fourth "					3	1	1				5
Fifth "								1			1
Number not stated			15	5	6	1	1			1	29
Total, 1899		97	4,681	1,459	382	135	64	20	1	4	6,843
1898		83	4,495	1,365	360	174	60	20		8	6,565
1897		96	4,461	1,261	377	158	77	27		4	6,461
1896		110	4,631	1,364	365	155	73	15	1		6,714
1895		123	4,558	1,211	375	163	72	20	1		6,623
1894		110	3,922	1,194	362	150	71	17	2	2	5,830
1893		127	4,447	1,240	386	153	85	15	2	4	5,459
1892		119	4,594	1,270	356	159	73	24	1		6,596
1891		115	4,525	1,257	374	139	60	22	1	1	6,494
1890		147	4,240	1,252	379	144	94	18	3	7	6,284

The number of persons who were married in each County in 1899 were to every 1,000 of the population as follows:

Hartford County,	16.9	New Haven County,	15.9
New London County,	14.8	Fairfield County,	14.0
Windham County,	15.7	Litchfield County,	13.2
Middlesex County,	9.8	Tolland County,	13.1

It will be observed that Hartford County shows the highest marriage rate, and Middlesex the lowest.

The number of persons who were married in 1898 in each County were to every 1,000 of the population as follows:

Hartford County, 15.7; New Haven County, 15.8; New London County, 16.4; Fairfield County, 14.0; Windham County, 13.2; Litchfield County, 11.6; Middlesex County, 10.1; Tolland County, 12.2.

First Marriages and Re-marriages.—The marriages of bachelors and spinsters constituted 88.4 per cent. of the total; those of widows and widowers, 10.9 per cent. While in 0.5 per cent. the condition was not stated.

Of the males married in the year, 1.4 per cent. were boys under 20 years old.

Of the females under 20 there were 13.0 per cent.

Table XXV exhibits more in detail the foregoing facts.

MARRIAGES BY MONTHS.

This Table shows the number of Marriages in each town in each month.

TOWNS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mos. not stated.	Total.
Andover		1				1			1					3
Ansonia	10	7	2	9	7	13	5	14	11	16	18	5		117
Ashford	1		2			1		1						7
Avon					2									2
Barkhamsted									1					1
Beacon Falls					1				1	1	1			4
Berlin	1	1	3	5	1	2	1			2	1			17
Bethany						1						1		2
Bethel	1	2	1		1	2	1	1		4	3	2		18
Bethlehem		1	1									1		3
Bloomfield				1	2	1			1	1				6
Bolton												1		1
Bozrah						1		1		2				4
Branford		2	1	1		6	4		1	4	3	1		23
Bridgeport	52	37	16	74	67	63	40	40	54	81	79	56	2	661
Bridgewater									1					1
Bristol	1	3	1	4	6	4	3	5	4	5	12	11		59
Brookfield	1											1		2
Brooklyn		4		4	1	2		2	2	3	2			20
Burlington	4					1	1	1						7
Canaan			1							3	1			5
Canterbury			1							1				2
Canton				6	1	5		2	2	4	3	1		24
Chaplin	1	1							1					3
Chatham				1	2	3		1	3			1		11
Cheshire					1	1	1	1		2	1	3		10
Chester	1		1			2				3		1		8
Clinton	1							1	1	4	2	1		10
Colchester	3	3	1	1		1	1		3		3			16
Colebrook							1		1	1		1		4
Columbia							1	1						2
Cornwall					1						1			2
Coventry			2	2	1	1	1	1	1	3	4			16
Cromwell		1						1		2	4	2		10
Danbury	5	9	6	13	6	19	4	6	12	17	13	6		116
Darien				1		2		3	1	2		1		10
Derby	2	9	2	8	3	8	2	3	6	14	15	9		81
Durham								2	1	1				4
Eastford										1				1
East Granby								1	1					2
East Haddam	1		1	2	1	2		2			2			11
East Hartford	1	2	3	7	6	8	2	3	3	8	5	1		49
East Haven			1		2	1			1	2				7
East Lyme					2	1	2	1	2		1			9
Easton											1			1

MARRIAGES BY MONTHS—Continued.

Towns.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mos. not stated.	Total.
East Windsor.....	2		1	4	1	1	2		2	3	2			18
Ellington.....				2	1		2		1	1				7
Enfield.....	8	5	3	7	1	10	6	5	9	6	6	7		73
Essex.....		1	2	1	2	1				1	2			10
Fairfield.....	2	1	1	3	1	4		1	5	4		1		22
Farmington.....		1	2	1	3	2	1	2	2	4		3		21
Franklin.....					1		1	1						3
Glastonbury.....	2			2	1	2	1		1	3	7	2		21
Goshen.....		1	1			1						1		4
Granby.....	1			1		1			1		1			5
Greenwich.....	3	2	2	4	6	4	5	4	2	11	8	3		54
Griswold.....	2	4	1	4	2	5	1		2	7		4		32
Groton.....	1	1	2	5	2	2	2	4	5	3	5	2		34
Guilford.....		2	2	2	2	4	1	1		4	2	2		22
Haddam.....		1			1	3		1	1	1	2			10
Hamden.....	1	2	1	2		8	1	1	2	2	2			22
Hampton.....			1			2								3
Hartford.....	62	48	27	67	49	91	45	57	67	96	81	56		746
Hartland.....	1										1			2
Harwinton.....	1	1			1	1		1	1	1				7
Hebron.....			2		1		3	1						7
Huntington.....	1	4		3	5	3			4	6	4	2		32
Kent.....				1						2	1	1		5
Killingly.....	4	5	3	5	3	6	3	3	4	3	5	3		47
Killingworth.....							1							1
Lebanon.....		1		1		1		1		1				5
Ledyard.....						1		2	1	1				5
Lisbon.....									1					1
Litchfield.....	2	1		1	3	5		1	1	2	3			19
Lyme.....						1	1							2
Madison.....		1	2	1		3	1		2					10
Manchester.....	5	2	3	7	12	7	4	3	12	4	12	7		78
Mansfield.....	1				1	1				3	3	2		11
Marlborough.....														
Meriden.....	19	10	6	24	15	23	23	8	16	34	18	14		210
Middlebury.....						1			1		1			3
Middlefield.....			1							1		1		3
Middletown.....	8	9	3	9	6	14	2	8	9	8	9	2		87
Milford.....	3	1		2		8		4	2	4	3	2		29
Monroe.....				1		2	1	1						5
Montville.....	2	1	2	3	3	4	3	1	1	2	1	1		24
Morris.....					1		1	1	1	2	1			7
Naugatuck.....	7	4	3	7	5	8	5	8	4	8	12	11		82
New Britain.....	26	10	10	24	23	27	20	24	24	39	28	19		274
New Canaan.....			1		2			3						7
New Fairfield.....								1	1		1			3
New Hartford.....		4	2	1	2	6	2	4	4	7	4	4		40
New Haven.....	80	60	45	103	40	154	62	55	74	133	106	69		981
Newington.....					1			2						3
New London.....	21	9	10	19	12	18	16	9	16	16	26	9		181

MARRIAGES BY MONTHS—Continued.

TOWNS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mos. not stated.	Total.
New Milford	2	3	2	1	6	3	—	1	3	2	2	—	—	25
Newtown	—	1	1	2	—	—	—	1	2	3	3	—	—	17
Norfolk	1	—	—	—	—	1	—	1	—	1	1	—	—	5
North Branford	—	—	2	—	—	—	—	—	1	—	—	—	—	3
North Canaan	—	—	3	1	1	3	1	—	1	2	3	1	—	16
North Haven	—	—	—	2	2	1	—	—	—	3	3	1	—	12
North Stonington	—	—	—	—	1	—	—	—	—	—	2	—	—	3
Norwalk	9	5	3	9	5	19	7	17	12	11	16	12	—	125
Norwich	8	12	7	24	15	23	11	11	12	30	22	10	—	185
Old Lyme	—	1	—	—	—	1	—	—	3	1	1	—	—	7
Old Saybrook	—	1	—	—	1	1	2	1	—	1	—	1	—	8
Orange	1	1	4	4	3	7	6	3	2	5	3	1	—	40
Oxford	1	1	—	—	—	1	1	—	1	—	1	—	—	6
Plainfield	—	2	1	6	4	1	2	2	4	2	4	1	—	29
Plainville	1	1	—	1	1	2	1	2	1	2	2	—	—	14
Plymouth	1	—	1	—	—	—	1	—	1	2	4	2	—	12
Pomfret	—	2	3	2	1	—	—	—	2	2	—	—	—	12
Portland	1	3	—	1	5	4	2	2	1	4	3	3	—	29
Preston	—	—	—	1	1	1	—	3	—	3	2	—	—	11
Prospect	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Putnam	8	5	1	9	4	5	4	5	6	14	6	9	—	76
Redding	2	1	—	—	—	1	—	—	—	—	1	1	—	6
Ridgefield	—	1	1	—	—	—	2	—	1	—	1	—	—	7
Rocky Hill	—	—	—	—	—	1	—	—	1	—	—	—	—	2
Roxbury	2	—	—	—	1	—	—	—	—	1	—	—	—	4
Salem	—	—	1	—	1	—	1	—	—	—	1	—	—	4
Salisbury	—	2	—	3	1	2	—	1	2	1	3	1	—	16
Saybrook	1	—	—	2	—	—	1	—	1	1	—	—	—	6
Scotland	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Seymour	1	4	1	2	1	5	1	4	4	6	3	—	—	32
Sharon	—	1	—	1	—	1	—	—	1	1	—	3	—	8
Sherman	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Simsbury	1	1	2	2	3	3	—	—	—	2	3	3	—	20
Somers	—	1	—	—	1	2	1	1	1	1	—	1	—	9
Southbury	—	—	—	1	1	—	—	—	—	—	1	—	—	4
Southington	1	1	2	3	5	5	—	1	4	3	6	4	—	35
South Windsor	—	1	—	—	—	1	1	—	—	1	2	—	—	6
Sprague	—	1	—	—	—	—	1	1	—	1	1	1	—	6
Stafford	2	—	1	4	—	8	1	8	2	3	5	6	—	40
Stamford	8	14	8	15	8	21	5	6	14	17	19	16	—	151
Sterling	—	—	3	—	2	1	2	1	—	1	—	1	—	11
Stonington	1	7	2	7	4	11	1	7	1	8	12	5	—	66
Stratford	—	—	—	2	—	2	—	3	1	2	5	1	—	16
Suffield	1	1	1	1	3	—	—	3	4	1	3	1	—	19
Thomaston	1	4	1	3	3	3	3	—	8	3	7	2	—	38
Thompson	3	8	1	5	5	8	4	1	7	6	8	—	—	56
Tolland	1	1	—	—	—	1	2	1	1	—	—	—	—	8
Torrington	5	6	2	6	9	9	5	5	12	15	10	4	—	88
Trumbull	—	—	—	—	—	2	1	—	1	—	—	—	—	4
Union	2	1	—	2	—	—	—	—	—	—	—	—	—	5

MARRIAGES BY MONTHS—Continued.

TOWNS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mos. not stated.	Total.
East Windsor	2		1	4	1	1	2		2	3	2			18
Ellington				2	1		2		1	1				7
Enfield	8	5	3	7	1	10	6	5	9	6	6	7		73
Essex		1	2	1	2	1				1	2			10
Fairfield	2	1	1	3		4		1	5	4		1		22
Farmington		1	2	1	3	2	1	2	2	4		3		21
Franklin					1			1	1					3
Glastonbury	2			2	1	2	1		1	3	7	2		21
Goshen		1	1			1						1		4
Granby	1			1		1			1		1			5
Greenwich	3	2	2	4	6	4	5	4	2	11	8	3		54
Griswold	2	4	1	4	2	5	1		2	7		4		32
Groton	1	1	2	5	2	2	2	4	5	3	5	2		34
Guilford		2	2	2	2	4	1	1		4	2	2		22
Haddam		1			1	3		1	1	1	2			10
Hamden	1	2	1	2		8	1	1	2	2	2			22
Hampton			1			2								3
Hartford	62	48	27	67	49	91	45	57	67	96	81	56		746
Hartland	1										1			2
Harwinton	1	1			1	1		1	1	1				7
Hebron			2		1		3	1						7
Huntington	1	4		3	5	3			4	6	4	2		32
Kent				1						2	1	1		5
Killingly	4	5	3	5	3	6	3	3	4	3	5	3		47
Killingworth							1							1
Lebanon		1		1		1	1			1				5
Ledyard						1		2	1	1				5
Lisbon									1					1
Litchfield	2	1		1	3	5		1	1	2	3			19
Lyme						1	1							2
Madison		1	2	1		3	1		2					10
Manchester	5	2	3	7	12	7	4	3	12	4	12	7		78
Mansfield	1				1	1				3	3	2		11
Marlborough														
Meriden	19	10	6	24	15	23	23	8	16	34	18	14		210
Middlebury						1			1		1			3
Middlefield			1							1		1		3
Middletown	8	9	3	9	6	14	2	8	9	8	9	2		87
Milford	3	1		2		8		4	2	4	3	2		29
Monroe				1		2	1	1						5
Montville	2	1	2	3	3	4	3	1	1	2	1	1		24
Morris					1		1	1	1	2	1			7
Naugatuck	7	4	3	7	5	8	5	8	4	8	12	11		82
New Britain	26	10	10	24	23	27	20	24	24	39	28	19		274
New Canaan		1			2		1	3						7
New Fairfield								1	1		1			3
New Hartford		4	2	1	2	6	2	4	4	7	4	4		40
New Haven	80	60	45	103	40	154	62	55	74	133	106	69		981
Newington					1			2						3
New London	21	9	10	19	12	18	16	9	16	16	26	9		181

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MARRIAGES BY MONTHS—Continued.

TOWNS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mo. not stated.	Total.
New Milford	2	3	2	1	6	3	—	1	3	2	2	—	—	25
Newtown	—	1	1	2	—	—	4	1	2	3	3	—	—	17
Norfolk	1	—	—	—	—	1	—	1	—	1	1	—	—	5
North Branford	—	—	2	—	—	—	—	—	1	—	—	—	—	3
North Canaan	—	—	3	1	1	3	1	—	1	2	3	1	—	16
North Haven	—	—	—	2	2	1	—	—	1	3	3	1	—	12
North Stonington	—	—	—	1	—	—	—	—	—	—	2	—	—	3
Norwalk	9	5	3	9	5	19	7	17	12	11	16	12	—	125
Norwich	8	12	7	24	15	23	11	11	12	30	22	10	—	185
Old Lyme	—	1	—	—	1	—	—	—	3	1	1	—	—	7
Old Saybrook	—	1	—	—	1	1	2	1	—	—	1	—	—	8
Orange	1	1	4	4	3	7	6	3	2	5	3	1	—	40
Oxford	1	1	—	—	—	1	1	—	1	—	1	—	—	6
Plainfield	—	2	1	6	4	1	2	2	4	2	4	1	—	29
Plainville	1	1	—	1	1	2	1	2	1	2	2	—	—	14
Plymouth	1	—	1	—	—	—	1	—	1	2	4	2	—	12
Pomfret	—	2	3	2	1	—	—	—	2	2	—	—	—	12
Portland	1	3	—	1	5	4	2	2	1	4	3	3	—	29
Preston	—	—	—	1	1	1	—	3	—	3	2	—	—	11
Prospect	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Putnam	8	5	1	9	4	5	4	5	6	14	6	9	—	76
Redding	2	1	—	—	—	1	—	—	—	—	1	1	—	6
Ridgefield	—	1	1	—	—	2	—	1	—	1	1	—	—	7
Rocky Hill	—	—	—	—	—	1	—	—	1	—	—	—	—	2
Roxbury	2	—	—	—	1	—	—	—	—	1	—	—	—	4
Salem	—	—	1	—	1	—	1	—	—	—	1	—	—	4
Salisbury	—	2	—	3	1	2	—	1	2	1	3	1	—	16
Saybrook	1	—	—	2	—	—	1	—	1	1	—	—	—	6
Scotland	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Seymour	1	4	1	2	1	5	1	4	4	6	3	—	—	32
Sharon	—	1	—	1	—	1	—	—	1	1	—	3	—	8
Sherman	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Simsbury	1	1	2	2	3	3	—	—	—	2	3	3	—	20
Somers	—	1	—	—	1	2	1	1	1	1	—	1	—	9
Southbury	—	—	—	1	1	—	—	—	—	—	1	1	—	4
Southington	1	1	2	3	5	5	—	1	4	3	6	4	—	35
South Windsor	—	1	—	—	—	1	1	—	—	1	2	—	—	6
Sprague	—	1	—	—	—	—	1	1	—	1	1	1	—	6
Stafford	2	—	1	4	—	8	1	8	2	3	5	6	—	40
Stamford	8	14	8	15	8	21	5	6	14	17	19	16	—	151
Sterling	—	—	3	2	1	2	1	—	1	—	1	—	—	11
Stonington	1	7	2	7	4	11	1	7	1	8	12	5	—	66
Stratford	—	—	—	2	—	2	—	3	1	2	5	1	—	16
Suffield	1	1	1	1	3	—	—	3	4	1	3	1	—	19
Thomaston	1	4	1	3	3	3	3	—	8	3	7	2	—	38
Thompson	3	8	1	5	5	8	4	1	7	6	8	—	—	56
Tolland	1	1	—	—	—	1	2	1	1	—	1	—	—	8
Torrington	5	6	2	6	9	9	5	5	12	15	10	4	—	88
Trumbull	—	—	—	—	—	2	1	—	1	—	—	—	—	4
Union	2	1	—	2	—	—	—	—	—	—	—	—	—	5

MARRIAGES BY MONTHS—*Concluded.*

TOWNS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Mos. not stated.	Total.
Vernon	6	1	2	7	7	7	4	3	5	6	4	6		58
Voluntown				1		1	1			2	1	2		8
Wallingford	5	4	1	5	2	6	2		4	11	3	3		46
Warren	1													1
Washington			1		1			1	1					4
Waterbury	40	25	17	47	22	63	35	34	39	44	51	18		435
Waterford	1	1	2	1	2	1			1	4	2	1		16
Watertown	2		1	2	6	8	3	2	2	6	2	3		37
Westbrook				1										1
West Hartford				4	4		1		4	3		6		22
Weston										2		1		3
Westport		3		1	1	3			1	4	2	3		18
Wethersfield	1	3	1	1		2		1	2	1	2			14
Willington		1		1				1		1				4
Wilton			1			1					1			3
Winchester	1	3	3	4	4	13	4	3	2	11	7	3		58
Windham	8	4	3	5	7	5	8	11	6	7	12	5		81
Windsor		3	3	3		2		2	2	4	2	1		22
Windsor Locks	3	4		4	1	1	2	5	2	10	3	4		39
Wolcott									1					1
Woodbridge														
Woodbury			1			2				1	1	2		7
Woodstock		1	1		1	4				1		2		10
	484	423	275	665	481	872	415	466	587	892	795	486	2	6,843

TABLE XXVI.—COMPARATIVE AGES OF AMERICAN AND FOREIGN-BORN MOTHERS.

NO. OF MOTHERS AT BIRTH OF—	AMERICAN MOTHERS.										FOREIGN MOTHERS.										TOTAL FOR TEN YEARS		Nationality and age not stated.												
	TOTALS.										TOTALS.										American.	Foreign.													
	Under 15.	15-18.	18-20.	20-30.	30-40.	40-50.	Age not stated.	1899.	1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.	1909.	Age not stated.																
1st child.....	4 108 341	2123	529	24	19	3014	3044	3080	3172	3012	3111	3142	3159	3064	2982	37 214	353	244	7	8	2143	2908	2139	2200	1846	2202	2201	2174	1953	1775	30539	293821	49		
2d ".....	11 72	1615	554	37	14	2293	2294	2194	2214	2251	2318	2287	2227	2107	2052	6 51	141	396	20	14	1889	1876	1766	1768	2028	1972	1910	1777	1732	1806	1503	22907	18490	35	
3d ".....	1 19	843	554	37	14	1658	1573	1552	1694	1586	1616	1600	1562	1559	1375	1 1	1038	557	21	1	1632	1584	1698	1646	1566	1456	1524	1449	1415	1140	1503	15585	15116	35	
4th ".....	2 6	512	503	39	7	1653	1000	1080	1098	1112	1082	1070	1057	985	1042	1 1	635	634	38	6	1314	1315	1382	1328	1170	1261	1175	1015	1010	10649	12038	25			
5th ".....	110	226	43	5	5	744	709	750	795	731	717	717	720	690	636	1 1	376	633	38	1	1071	1045	1082	1027	979	916	835	732	654	7290	9638	15			
6th ".....	41	229	49	3	3	480	454	486	518	484	503	486	485	434	436	1 1	145	541	64	5	775	810	762	744	610	696	605	603	521	4353	4902	6390	11		
7th ".....	17	142	37	3	1	330	338	340	368	300	347	366	335	306	259	2 2	298	691	61	2	563	544	517	389	334	299	205	300	282	3292	4734	1			
8th ".....	6	113	47	1	1	167	140	140	159	123	127	133	144	123	123	2 2	201	64	1	1	298	271	231	249	235	227	226	220	208	187	2389	2832	4		
9th ".....	2	50	33	85	82	98	87	87	84	85	79	77	68	58	47	4 4	65	47	112	112	176	157	158	160	183	168	148	149	140	1618	1618	2			
10th ".....	34	26	60	57	43	49	55	41	36	41	40	37	38	37	35	1 1	47	47	80	77	77	74	47	80	65	65	49	68	255	409	606	...			
11th ".....	14	14	22	23	23	23	23	23	23	23	23	23	23	22	22	1 1	19	19	37	38	33	33	52	54	41	54	36	50	43	43	151	405	...		
12th ".....	11	9	20	13	25	15	10	10	10	10	16	17	12	12	12	1 1	9	15	20	24	35	22	19	19	23	20	22	20	16	61	220	...			
13th ".....	7	7	6	8	2	3	3	3	3	3	3	3	3	3	3	1 1	5	10	10	12	14	12	11	13	11	13	11	13	11	39	144	1			
14th ".....	7	7	6	8	2	3	3	3	3	3	3	3	3	3	3	1 1	5	4	4	4	9	7	3	7	5	5	4	6	4	4	19	54	...		
15th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	2	2	2	2	3	3	3	7	3	3	4	4	4	6	29	29	...		
16th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	4	4	4	4	2	2	2	4	4	4	4	4	4	4	29	29	...		
17th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11	11	...		
18th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	2	2	2	2	1	1	1	1	1	1	1	1	1	1	3	3	...		
19th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	...		
20th ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	3	3	...		
21st ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	...		
22d ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	...		
23d ".....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	...		
Between 10th and 20th	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	...		
No. not stated.....	1	17	10	2	13	43	59	42	23	18	13	23	9	1	3	1 1	5	34	17	2	69	83	44	15	74	59	51	121	9	38	90	385	1		
Total.....	4 120	435	5554	3350	436	78	9977	10229	10100	10494	10009	10237	10239	10079	9710	9153	45	282	5359	4294	576	2	54	10582	10443	10249	10090	9740	9639	974291	8503	7762	100236	96658	296

TABLE XXVII.—DIVORCES GRANTED IN THE STATE OF CONNECTICUT BY THE SUPERIOR COURT DURING 1899.

CAUSES.	Hartford Co.	New Haven Co.	New London Co.	Fairfield Co.	Windham Co.	Litchfield Co.	Middlesex Co.	Tolland Co.	Total.
Adultery	12	18	8	16	5	5	3	2	69
Adultery and desertion	1	1				1			2
Adultery and intemperance	1	1							2
Bigamy				2					2
Cruelty	22	12	4	17		7	1	4	67
Cruelty and desertion		1							1
Cruelty and intemperance		5	2	2	2			1	12
Desertion	39	50	15	58	16	15	7	7	207
Desertion and intemperance		1							1
Intemperance	9	20	4	18	5	5	2	3	66
Corporal imbecility		1		1					2
Total	83	110	33	114	28	33	13	17	431

TABLE XXVIII.—DIVORCES FOR PAST 10 YEARS.

COUNTIES.	1899.	1898.	1897.	1896.	1895.	1894.	1893.	1892.	1891.	1890.
Hartford	83	82	103	62	75	93	62	76	104	76
New Haven	110	151	131	161	127	69	110	128	122	166
New London	33	31	32	44	54	33	46	59	43	54
Fairfield	114	84	75	95	105	88	107	132	98	94
Windham	28	14	20	23	10	27	10	27	24	39
Litchfield	33	34	17	34	24	32	26	37	43	23
Middlesex	13	14	13	16	14	13	15	19	22	9
Tolland	17	19	12	14	8	12	14	23	19	16
Total	431	429	403	449	417	367	390	501	475	477

DEATHS.

The registered mortality in 1899 exclusive of still-births numbered 14,381, which was 211 more than in the preceding year.

Upon the estimated population, 912,159, the death-rate was 15.7 per 1,000 living population.

The deaths of males on record numbered 7,357 ; of females, 7,020 ; of 4 decedents the sex is not stated.

The greatest mortality was registered in January and reached 1,577. The smallest mortality was in November, amounting to 990.

The annual rates represented by the deaths registered in each quarter were as follows :

					Total Deaths.
First quarter, 17.6 per 1,000 of living population				-----	4,005
Second " 14.3 "			"	-----	3,261
Third " 17.1 "			"	-----	3,908
Fourth " 14.0 "			"	-----	3,207
					14,381

The annual death-rate was 15.7.

CAUSES OF DEATH.

The deaths registered, of which no cause was given, in 1899, was 35 out of a total of 14,381, being 0.24 of total mortality.

Among so many thousand deaths there will inevitably occur a small percentage respecting which the causes cannot be ascertained, and a large percentage in which the cause given is so vague and general that it cannot be assigned to any definite class. For example, Debility, Hemorrhage, Abscess, etc.

**DEATHS FROM UNKNOWN OR UNSPECIFIED CAUSES OF
DEATHS AND PERCENTAGES, 1878-1899 (22 YEARS).**

Year.	Total.	Deaths from causes not stated.	Percentage of Total Mortality.
1878	9,352	624	6.6
1879	9,394	545	5.8
1880	10,408	536	5.1
1881	10,907	502	4.6
1882	11,662	390	3.3
1883	11,926	369	3.1
1884	11,351	377	3.4
1885	12,033	437	3.6
1886	11,616	305	2.6
1887	12,385	215	1.7
1888	12,980	99	.8
1889	12,529	71	.5
1890	13,665	33	.2
1891	14,385	38	.2
1892	15,170	26	.3
1893	14,901	30	.2
1894	13,699	32	.2
1895	14,546	22	.1
1896	15,025	20	.1
1897	13,915	24	.1
1898	14,170	32	.2
1899	14,381	35	.2

CAUSES OF DEATH CONSIDERED BY CLASSES.

CLASS I.—ZYMOTIC DISEASES.

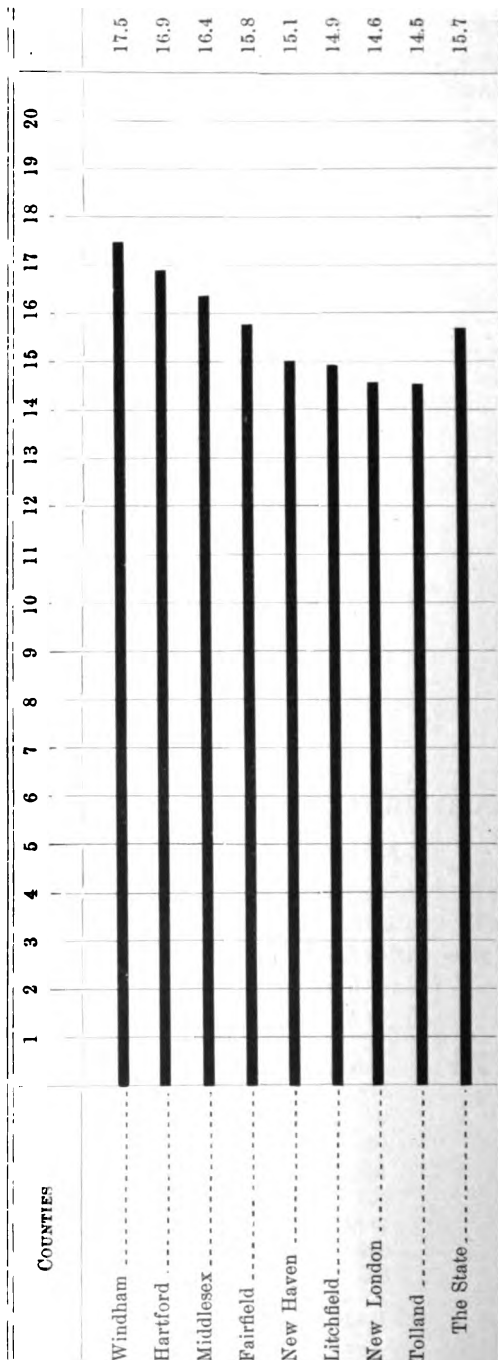
The deaths from zymotic diseases registered in 1899 amounted to 2,878, or 20.0 per cent. of the total mortality. The deaths from this class of diseases were 110 more than the year before.

From the causes of death as registered under the different classes the percentage of each was as follows:

	Deaths.	Percentage of Total Mortality.
From the Zymotic	2,878	20.00
" Parasitic	3	.02
" Dietetic	94	.65
" Constitutional	2,451	17.00
" Developmental	855	5.94
" Local	6,755	46.97
" Violence.....	850	5.91
" Unclassified and not stated.....	495	3.44
	<hr/> 14,381	<hr/> 100.00

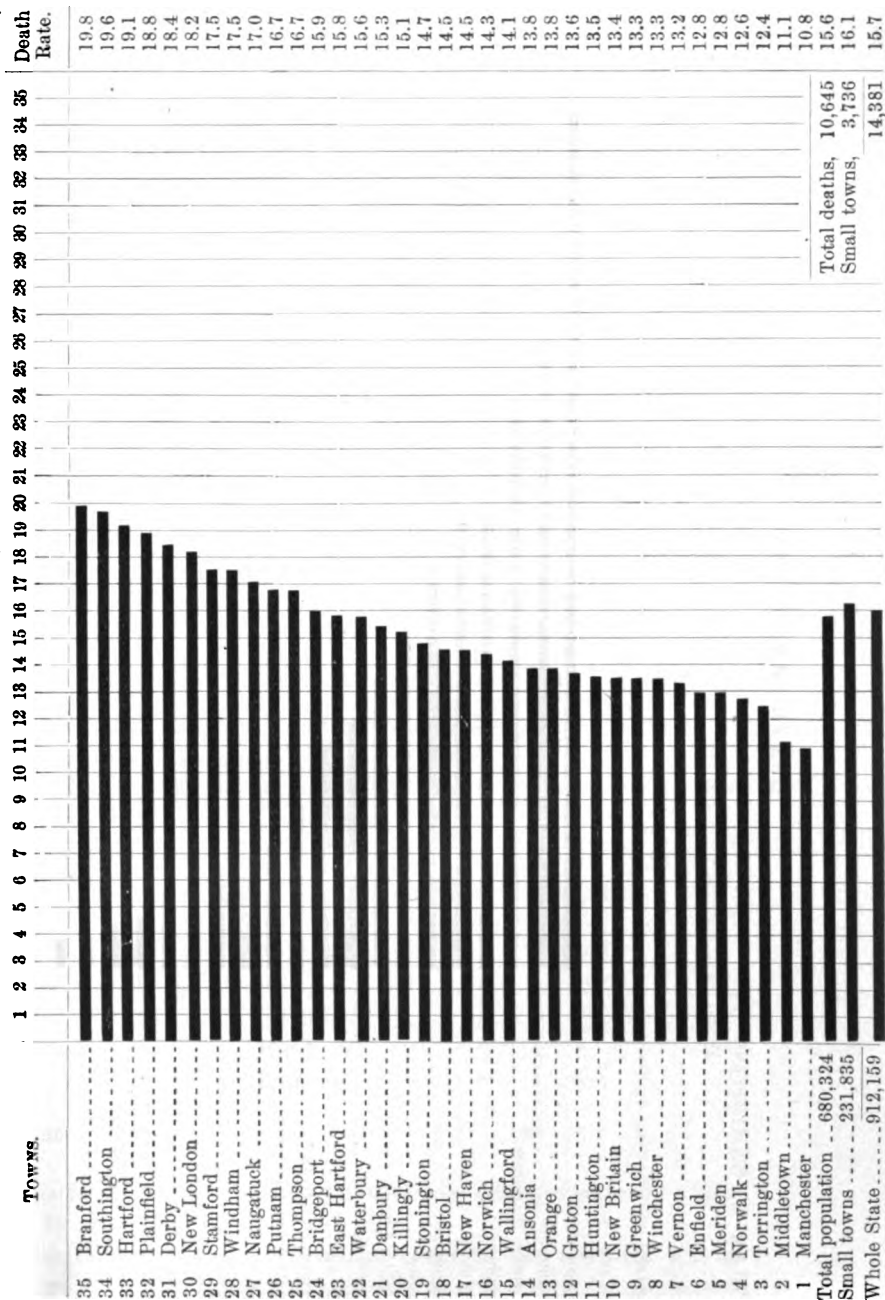
DEATH RATE, 1899.

DIAGRAM C, SHOWING THE NUMBER OF DEATHS TO EACH 1,000 OF THE POPULATION BY COUNTIES.



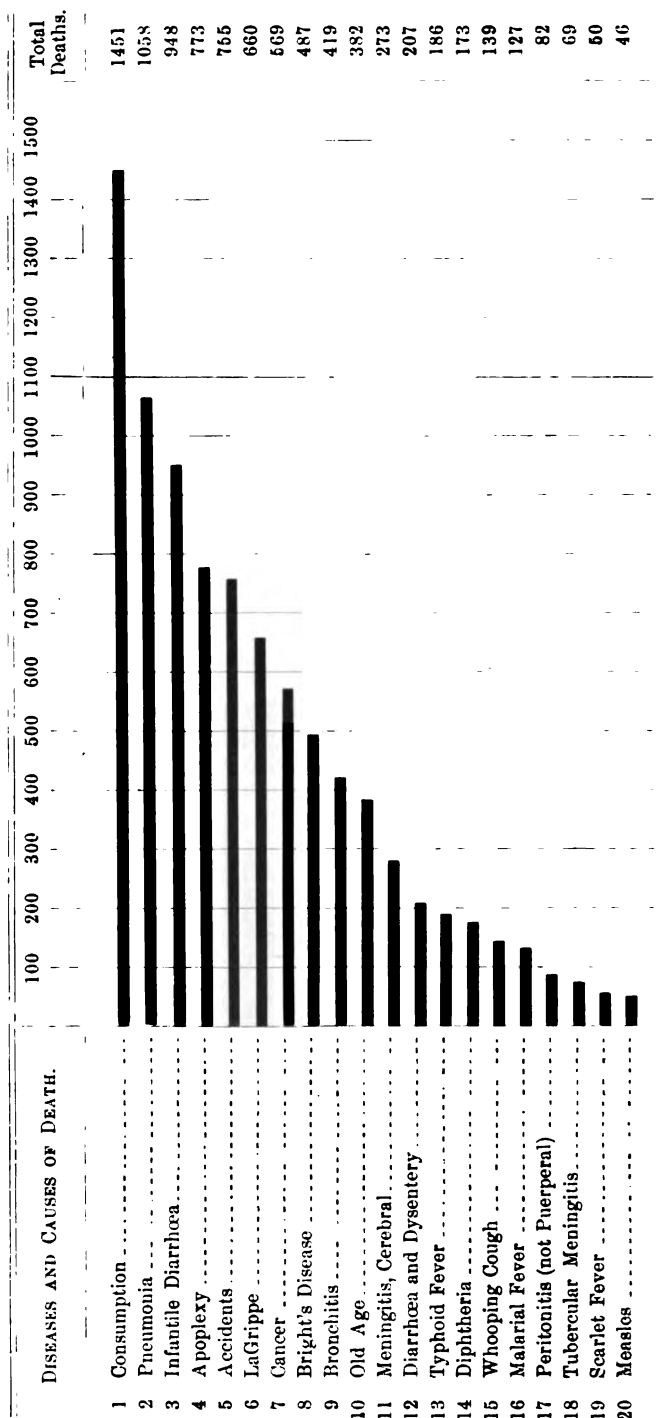
DEATH RATE, 1899.

DIAGRAM D, SHOWING THE DEATH RATE TO EACH 1000 OF THE POPULATION IN EVERY TOWN OF OVER 5000 INHABITANTS, AND OF THE REMAINDER OF THE STATE.



DEATH RATE, 1899.

DIAGRAM E, EXHIBITING THE COMPARATIVE MORTALITY, BY ABSOLUTE NUMBERS, FROM TWENTY OF THE MOST PROMINENT CAUSES OF DEATH IN CONNECTICUT IN 1899.



The following table gives the percentage by classes for 22 years, 1878-1899:

Years.	Zymotic.	Parasitic.	Dietetic.	Constitutional.	Developmental.	Local.	Violence.
1878	22.61	---	.37	20.39	10.72	31.83	4.50
1879	18.72	---	.41	19.49	11.52	37.34	4.34
1880	22.82	.06	.45	19.12	10.36	37.85	3.95
1881	23.03	---	.57	20.27	11.79	36.03	3.53
1882	24.70	.02	.48	18.92	11.42	36.76	4.25
1883	23.69	.02	.38	18.43	11.78	35.47	4.20
1884	21.27	.02	.41	19.43	12.73	35.69	3.72
1885	19.36	.01	.41	18.40	12.34	38.71	4.11
1886	19.31	.01	.55	17.80	12.69	37.80	4.10
1887	21.40	.01	.38	17.45	7.99	40.45	4.24
1888	21.40	.09	.34	17.73	7.25	42.55	4.25
1889	20.07	.01	.45	17.72	7.98	41.44	4.63
1890	19.45	---	.54	17.38	6.56	46.22	4.09
1891	21.55	.01	.59	16.57	6.81	44.42	4.51
1892	22.74	.03	.51	15.02	6.31	45.26	4.52
1893	20.84	---	.48	15.94	5.85	46.68	4.89
1894	19.69	---	.39	16.70	6.13	46.57	5.02
1895	18.85	---	.42	16.74	6.45	47.76	4.89
1896	19.04	.01	.40	15.66	6.25	48.21	4.55
1897	16.61	.01	.48	16.93	6.32	49.63	5.10
1898	19.53	.01	.62	16.89	5.82	48.03	5.19
1899	20.00	.02	.65	17.00	5.94	46.97	5.91

A brief reference to some of the special diseases of the Zymotic class may be of interest.

Measles.—This disease caused 46 deaths, against 80 in the previous year.

They were fatal

In 8 towns in Hartford County with 26 deaths.

" 2	"	New Haven	"	"	3	"
" 2	"	Fairfield	"	"	9	"
" 2	"	Windham	"	"	2	"
" 1	"	Litchfield	"	"	1	"
" 4	"	Middlesex	"	"	4	"
" 1	"	Tolland	"	"	1	"

State, 20

46

Scarlet Fever was fatal in 50 instances during the year, which was 12 more than in the year before.

The fatal prevalence of scarlet fever in the counties was as follows:

In 3 towns in Hartford County with 5 deaths.

" 2	"	New Haven	"	"	9	"
" 4	"	New London	"	"	6	"
" 5	"	Fairfield	"	"	16	"
" 2	"	Windham	"	"	2	"
" 2	"	Litchfield	"	"	4	"
" 4	"	Middlesex	"	"	6	"
" 2	"	Tolland	"	"	2	"

State, 24

50

The mortality from *La Grippe* occurred in counties as follows:

In 23 towns in Hartford County with 146 deaths.

" 22	"	New Haven	"	"	172	"
" 14	"	New London	"	"	54	"
" 18	"	Fairfield	"	"	101	"
" 11	"	Windham	"	"	46	"
" 21	"	Litchfield	"	"	74	"
" 12	"	Middlesex	"	"	35	"
" 11	"	Tolland	"	"	32	"

State, 132

660

The mortality from *Diphtheria and Croup* occurred in counties as follows:

In 12 towns in Hartford County with 103 deaths.

" 9	"	New Haven	"	"	47	"
" 7	"	New London	"	"	18	"
" 8	"	Fairfield	"	"	34	"
" 4	"	Windham	"	"	8	"
" 8	"	Litchfield	"	"	12	"
" 3	"	Middlesex	"	"	6	"
" 5	"	Tolland	"	"	9	"

State, 56

237

Whooping Cough was fatal in 139 instances:

In 9 towns in Hartford County with 41 deaths.

" 6	"	New Haven	"	"	24	"
" 3	"	New London	"	"	4	"
" 7	"	Fairfield	"	"	45	"
" 4	"	Windham	"	"	5	"
" 4	"	Litchfield	"	"	6	"
" 4	"	Middlesex	"	"	10	"
" 2	"	Tolland	"	"	4	"

State, 39

139

Typhoid Fever was fatal in 186 instances during the year, which was 3 less than in the year before.

DEATHS FROM TYPHOID FEVER BY COUNTIES.

FOR 45 YEARS—1855—1899.

	Hartford County.	New Haven County.	New London County.	Fairfield County.	Windham County.	Litchfield County.	Middlesex County.	Tolland County.	Total.	Per cent. to known causes.
1855	58	62	32	15	25	28	27	20	273	5.50
1856	47	62	31	16	29	30	20	15	266	4.62
1857	61	58	28	15	27	35	29	14	267	4.55
1858	68	68	25	35	25	34	16	24	285	4.89
1859	78	55	25	48	26	36	17	22	307	5.30
1860	59	91	24	28	35	40	20	17	314	5.60
1861	92	74	32	34	42	32	23	31	360	5.25
1862	99	83	45	46	24	36	24	24	381	5.10
1863	112	96	61	39	19	45	28	27	427	5.71
1864	97	117	52	43	18	54	29	32	442	5.44
1865	129	97	80	50	60	57	42	27	548	7.79
1866	77	79	49	37	36	20	15	19	332	4.95
1867	117	105	38	38	25	46	19	28	415	6.39
1868	81	104	32	33	31	30	30	25	366	5.54
1869	84	130	35	59	38	48	38	30	458	5.63
1870	87	124	31	54	37	44	35	25	427	5.49
1871	64	111	25	53	31	34	29	5	352	4.93
1872	134	134	37	67	39	39	32	24	506	5.76
1873	114	117	37	43	33	41	24	21	430	5.00
1874	69	109	48	31	32	32	28	21	370	4.68
1875	103	119	38	45	40	44	32	28	449	3.11
1876	76	79	42	42	25	32	12	20	328	3.58
1877	80	80	33	40	25	26	17	28	329	3.32
1878	39	55	30	28	27	27	25	15	346	2.70
1879	30	24	34	26	14	15	5	11	169	1.77
1880	40	47	32	31	34	21	19	18	242	2.51
1881	52	68	23	32	30	18	19	15	257	2.45
1882	64	76	35	35	37	28	24	25	325	3.10
1883	49	118	26	29	28	18	14	20	292	2.14
1884	61	93	29	30	25	11	16	16	281	2.47
1885	66	56	22	31	18	19	8	7	227	1.09
1886	50	70	19	30	29	21	13	12	244	2.15
1887	33	51	15	37	19	14	12	14	195	1.16
1888	75	95	16	31	28	21	15	11	292	2.21
1889	62	62	26	68	20	21	6	16	281	2.25
1890	64	103	24	42	17	21	31	10	312	3.28
1891	76	77	23	49	26	15	24	11	301	2.09
1892	93	85	35	45	14	10	18	9	309	2.03
1893	72	76	21	42	17	24	16	7	275	1.84
1894	83	66	23	21	18	18	13	8	250	1.82
1895	61	72	8	75	13	20	6	4	259	1.78
1896	45	61	21	32	18	17	10	3	207	1.37
1897	39	49	9	28	8	7	5	6	151	1.08
1898	58	69	15	21	6	9	6	5	189	1.33
1899	67	61	15	25	6	14	5	3	186	1.28

MORTALITY FROM PROMINENT ZYMOTIC DISEASES.

10 YEARS.

YEARS.	DISEASES.									
	Small Pox & Varioloid.	Measles.	Scarlet Fever.	La Grippe.	Typhoid Fever.	Whooping Cough.	Diphtheria.	Membranous Croup.	Infantile Diarrhoea.	Dysentery.
1890	12	18	67	185	312	137	435	122	879	98
1891	1	115	149	366	301	79	410	156	967	101
1892	4	49	280	564	309	64	369	173	968	105
1893	3	69	217	262	275	122	264	203	972	119
1894	16	30	64	214	250	130	206	162	943	185
1895	3	26	65	275	259	127	262	126	889	177
1896		259	82	118	207	53	375	124	930	136
1897		52	69	161	151	130	310	106	809	118
1898		80	38	290	189	172	219	64	1089	204
1899		46	50	660	186	139	173	64	948	161
Average	3.	74.	108.	308.	243.	115.	302.	130.	939.	140.
										2366.

The deaths from the above ten principal diseases registered in 1899 form 16.8 per cent. of the deaths from all causes, and are equal to 26.6 deaths in every 10,000 of the population.

CLASS II. PARASITIC DISEASES.

Although the diseases of this class are seldom fatal, they are by no means insignificant, and are often the occasion of much suffering. Only three fatal events were attributed to them during the year.

CLASS III. DIETETIC DISEASES.

There were 94 deaths registered in this class, all but 11 of which were certified to be due to the excessive use of alcoholic stimulants.

CLASS IV. CONSTITUTIONAL DISEASES.

The deaths registered in this class as resulting from diseases termed Constitutional numbered 2,451, that is 17.0 per cent. of the deaths from all causes, 57 more than was reported in this class last year.

Consumption and other tubercular diseases constituted 1,580 of the whole class.

In the light of recent discoveries, tubercular diseases are infectious and should be included among the Zymotic class, but for the present are retained in Class IV in accordance with long usage.

CLASS V. DEVELOPMENTAL DISEASES.

In this class were registered 855.

Of these 382 were ascribed to old age, 358 to premature birth, 26 to cyanosis, 48 to congenital malformation, and 41 to other causes.

Still-births are not included in this class, but are enumerated separately. See Table XXII.

Still-births are not enumerated as deaths in any part of this report.

CLASS VI. LOCAL DISEASES.

The deaths of this class always exceed those of any other. The registered number in 1899 was 6,755, or 46.9 per cent. of the total mortality of the year. This class of diseases are subdivided into orders, according to the different portions of the body in which the diseases are located.

Diseases of the Nervous System were registered as fatal in 1,833 instances, of which 773 were apoplexy, 273 by inflammation of the brain or its membranes; 201 by "convulsions," a term of very indefinite meaning; 61 by softening of the brain, 83 by insanity; and 442 by various other disorders of the nervous system.

Diseases of the Circulatory System caused 1,230 deaths, of which 1,090 were recorded as from various diseases of the heart, which is a little more than 7.5 per cent. of the total mortality in the State.

Diseases of the Respiratory System were the cause of death in 1,688 cases. Of these 1,058 were credited to pneumonia, 419 to bronchitis, and 33 to pleurisy.

Diseases of the Digestive System.—This group contributed 832 to the total mortality of the year. They included 91 from enteritis, 82 from non-puerperal peritonitis, 48 from appendicitis, 209 from various diseases of the liver, 402 from diseases of the stomach, etc.

Diseases of the Urinary System occasioned 913 deaths, of which Bright's disease and nephritis caused 732 deaths, and 62 deaths were ascribed to uræmia.

The remaining deaths from "Local Diseases" comprise 14 deaths from diseases of the eye, ear and nose, *organs of special sense*; 13 from the *Lymphatic System*; of the Reproductive

System, 39; of diseases and accidents incident to Parturition, 163; of the *Locomotor System*, 7; and of the *Integumentary System*, 21.

MORTALITY FROM PRINCIPAL LOCAL DISEASES—10 YEARS.

YEARS.	DISEASES.										
	Apoplexy.	Paralysis.	Insanity.	Convulsions.	Heart Disease.	Bronchitis.	Pneumonia.	Pleurisy.	Peritonitis.	Bright's Disease, Nephritis, and other Kidney Diseases.	Totals.
1890	542	78	76	281	857	455	1430	31	120	422	4292
1891	588	36	58	290	825	481	1442	31	136	482	4369
1892	607	29	60	329	851	546	1493	38	163	514	4630
1893	631	41	56	300	926	521	1465	38	128	591	4697
1894	583	34	63	250	896	446	1118	34	153	520	4097
1895	689	54	66	327	1016	539	1289	44	129	605	4748
1896	683	43	76	320	942	525	1361	42	118	688	4798
1897	744	60	77	265	1007	391	1284	41	108	725	4692
1898	739	41	62	193	1101	464	1092	26	88	786	4592
1899	773	47	83	201	1090	419	1058	33	82	805	4591
Average	657.	46.	66.	274.	951.	478.	1303.	35.	122.	613.	4550

CLASS VII. VIOLENCE.

The number of deaths caused by violence or negligence during the year, as registered, was 850, being 114 more than the year before, which was 5.9 per cent. of the total mortality of the year.

Accident or negligence caused 755; homicide and suicide 95; injuries on railroad resulted fatally in 180 cases; 115 were accidentally drowned.

Of the suicides, 7 chose drowning and 15 hanging as a means of exit from life. The remaining 60 selected various modes.

CLASS VIII. UNCLASSIFIED.

This class is an enumeration of deaths in which no cause is stated, or, if stated, it is in terms so general as to prevent proper classification. There were 495 in the list, in 35 of which no cause of death was given. The remaining 460 were described as due to "Tumors," "Debility," etc., none of which causes are sufficiently definite to admit of classification.

STATEMENT OF BIRTHS FOR THE TEN YEARS ENDING DECEMBER 31, 1899.

COUNTIES.	Sex.	1890.	1891.	1892.	1893.	1894.	1895.	1896.	1897.	1898.	1899.	Total for 10 yrs.
Hartford	Male	1,691	1,882	1,997	2,049	2,058	1,956	2,152	2,205	2,229	2,205	20,814
	Female	1,508	1,646	1,774	1,910	1,824	1,990	2,051	2,080	2,107	2,154	18,964
	Not stated	19	13	25	25	16	15	12	23	14	24	186
	Total....	3,218	3,491	3,736	3,984	3,898	3,901	4,215	4,288	4,350	4,383	39,464
New Haven.	Male	2,762	3,105	3,262	3,354	3,649	3,510	3,674	3,500	3,662	3,611	34,149
	Female	2,781	2,849	3,114	3,171	3,057	3,168	3,369	3,328	3,396	3,352	31,555
	Not stated	42	42	41	91	62	54	20	23	19	21	415
	Total....	5,585	5,996	6,417	6,616	6,768	6,732	7,063	6,911	7,047	6,984	66,119
New London	Male	811	872	908	915	923	887	1,001	911	967	901	9,096
	Female	753	782	837	884	838	838	843	823	855	858	8,321
	Not stated	3	4	3	3	3	3	4	3	4	11	36
	Total....	1,567	1,658	1,749	1,802	1,761	1,728	1,844	1,737	1,826	1,770	17,452
Fairfield	Male	1,871	1,954	2,106	2,227	2,089	2,045	2,323	2,107	2,213	2,155	21,090
	Female	1,794	1,902	2,078	1,973	2,016	1,882	2,104	1,931	1,915	1,996	19,559
	Not stated	27	20	36	40	61	51	46	26	30	23	369
	Total....	3,692	3,885	4,218	4,240	4,166	3,978	4,473	4,064	4,158	4,144	41,018
Windham ...	Male	512	503	567	555	619	526	623	538	549	496	5,488
	Female	468	480	550	493	580	483	538	501	503	481	5,077
	Not stated	10	5	6	2	3	4	1	3	1	3	38
	Total....	990	988	1,123	1,050	1,202	1,013	1,162	1,042	1,053	980	10,603
Litchfield....	Male	545	537	558	506	580	581	602	680	618	606	5,943
	Female	474	536	520	542	604	584	604	604	656	645	5,763
	Not stated	7	10	7	2	3	6	8	7	2	4	56
	Total....	1,026	1,083	1,085	1,110	1,187	1,171	1,214	1,271	1,270	1,245	11,762
Middlesex ...	Male	404	446	446	455	439	452	426	420	406	433	4,327
	Female	393	451	399	451	397	427	384	380	382	340	4,004
	Not stated	---	2	---	2	3	---	1	2	2	2	16
	Total....	797	899	847	908	839	879	811	802	790	775	8,347
Tolland	Male	281	307	324	311	270	283	279	222	253	242	2,778
	Female	238	240	248	273	254	243	239	239	272	230	2,496
	Not stated	---	1	2	2	---	3	4	4	4	2	22
	Total....	519	548	575	586	524	529	542	465	529	474	5,291
Total for the State	Male	8,877	9,556	10,109	10,432	10,627	10,240	11,080	10,623	10,897	10,739	103,180
	Female	8,409	8,896	9,518	9,697	9,570	9,555	10,152	9,896	10,050	10,026	95,799
	Not stated	108	108	123	167	143	136	92	91	76	90	1,187
Grand Total.	.....	17,394	18,558	19,750	20,296	20,345	19,931	21,324	20,580	21,023	20,855	200,066

STATEMENT OF DEATHS FOR THE TEN YEARS ENDING DECEMBER 31, 1899.

COUNTIES.	SEX.	1890.	1891.	1892.	1893.	1894.	1895.	1896.	1897.	1898.	1899.	Total for 10 yrs.
Hartford	Male	1,411	1,490	1,622	1,522	1,389	1,437	1,570	1,508	1,544	1,618	15,059
	Female	1,335	1,445	1,482	1,524	1,221	1,300	1,411	1,378	1,394	1,508	14,178
	Not stated .....	.....	1	1	1	.....	.....	6	7	1	1	18
	Total	2,746	2,936	3,105	3,047	2,580	2,827	2,987	2,891	2,939	3,217	29,255
New Haven	Male	2,053	2,107	2,190	2,271	2,100	2,199	2,352	2,170	2,178	2,181	21,751
	Female	1,894	1,943	2,009	2,170	1,917	2,032	2,172	1,894	2,140	2,020	20,191
	Not stated	1	.....	2	.....	.....	1	1	3	.....	2	10
	Total	3,948	4,050	4,201	4,441	4,017	4,232	4,525	4,067	4,318	4,153	41,952
New London	Male	753	713	755	721	717	720	720	650	716	633	7,096
	Female	691	684	725	720	698	665	717	722	612	637	6,871
	Not stated .....	.....	.....	1	1	.....	1	1	.....	.....	.....	4
	Total	1,444	1,397	1,481	1,442	1,415	1,386	1,438	1,372	1,328	1,270	13,973
Fairfield	Male	1,356	1,566	1,642	1,607	1,472	1,543	1,636	1,507	1,465	1,548	15,342
	Female	1,238	1,393	1,444	1,424	1,399	1,516	1,414	1,302	1,341	1,343	13,784
	Not stated	2	3	3	7	6	10	3	3	1	1	39
	Total	2,626	2,962	3,089	3,038	2,877	3,069	3,053	2,812	2,807	2,892	29,165
Windham	Male	409	438	433	437	432	432	438	419	410	382	4,230
	Female	434	408	456	425	441	432	439	404	397	414	4,300
	Not stated .....	.....	.....	1	3	.....	.....	.....	1	1	.....	6
	Total	843	846	890	865	873	914	877	824	808	796	8,536
Litchfield	Male	426	438	501	473	490	480	479	432	423	476	4,618
	Female	433	450	499	396	408	462	445	455	403	464	4,416
	Not stated	3	4	1	.....	.....	2	4	1	.....	.....	15
	Total	862	892	1,001	869	898	944	928	888	826	940	9,049
Middlesex	Male	413	430	459	378	391	373	402	341	403	386	3,976
	Female	391	394	453	362	342	352	367	317	337	349	3,664
	Not stated	1	.....	1	1	.....	.....	1	1	.....	.....	5
	Total	805	824	913	741	733	725	770	659	740	735	7,645
Tolland	Male	195	252	257	235	226	234	224	215	201	183	2,222
	Female	196	225	233	223	159	215	223	185	203	195	2,057
	Not stated .....	.....	1	.....	.....	.....	.....	.....	2	.....	.....	3
	Total	391	478	490	458	385	449	447	402	404	378	4,282
Total for the State	Male	7,016	7,434	7,859	7,644	7,187	7,418	7,821	7,240	7,340	7,357	74,296
	Female	6,642	6,942	7,301	7,244	6,526	7,114	7,184	6,957	6,927	7,020	69,461
	Not stated	7	9	10	13	6	14	16	18	3	4	100
	Grand Total	13,665	14,385	15,170	14,901	13,699	14,546	15,025	13,915	14,170	14,381	143,857

REGISTRATION REPORT.

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METEOROLOGICAL RECORD.—PREPARED BY L. M. TARR, OBSERVER U. S. WEATHER BUREAU.

Observations taken at U. S. Weather Office, in New Haven, Conn., during 1899.

1899. MONTH.	BAROMETRIC PRESSURE.				TEMPERATURE.				HUMIDITY.		PRECIPITATION.		WIND.		
	Monthly mean Barometer.	Highest Barometer during month.	Lowest Barometer during month.	Range of Pressure during month.	Monthly mean Temperature.	Highest Temperature.	Lowest Temperature.	Range.	Monthly mean Rel. Humidity.	Per cent.	Amount of Rain and Melted Snow.	No. of days on which rain or snow occurred.	Prevailing Direction.	Highest Velocity.	Total number of miles of movement.
January	30.14	30.92	29.48	1.49	27.8	52	-4	56	74	74	4.33	11	S. W.	36	7,441
February	30.02	30.57	29.23	1.34	24.6	55	-9	64	76	76	3.39	15	N.	48	6,998
March	29.95	30.48	28.93	1.55	34.4	54	17	37	77	77	7.28	15	N.	46	8,350
April	30.08	30.39	29.55	.84	47.0	74	27	47	65	65	1.79	5	N. W.	33	6,479
May	30.04	30.32	29.71	.61	58.4	82	38	44	67	67	2.52	10	S. W.	30	6,048
June	30.02	30.30	29.81	.49	68.8	95	52	43	71	71	2.59	7	S. W.	32	5,353
July	29.96	30.26	29.71	.55	71.5	90	51	39	76	76	4.17	9	S. W.	30	5,375
August	29.99	30.30	29.78	.52	69.9	88	50	38	79	79	.65	6	N. E.	20	5,053
September	30.06	30.48	29.62	.86	62.2	82	41	41	77	77	3.33	9	S. W.	27	6,107
October	30.22	30.52	29.70	.82	54.2	74	29	45	82	82	1.78	6	N. E.	30	5,937
November	30.04	30.53	29.53	1.00	42.0	62	25	37	76	76	1.89	8	N.	36	6,137
December	30.08	30.66	29.37	1.30	34.0	59	6	53	76	76	1.56	6	N. W.	44	6,753
For the year	Mean 30.06	Highest 30.92	Lowest 28.93	Mean Range .95	Mean 47.6	Highest 95	Lowest -9	Mean Range 45	Mean 75	75	Total. 35.28	Total. 107	Prevailing Direction S. W.	Highest 48	Total 76,031

METEOROLOGICAL OBSERVATIONS.
Taken by the U. S. Weather Bureau in New Haven, Conn., since 1873.

YEAR.	COMPARATIVE TEMPERATURES.												COMPARATIVE PRECIPITATION.													
	Jan.	Feb.	March.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Annual means	Jan.	Feb.	March.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
1873	24.1	28.4	33.1	44.1	56.7	67.1	72.4	69.1	62.4	52.3	43.1	32.8	47.8	7.42	3.45	4.01	4.95	6.27	2.07	1.55	9.90	2.12	6.18	4.73	4.41	57.05
1874	31.3	28.0	34.1	40.0	57.2	67.6	72.3	68.1	64.9	52.5	41.2	33.2	49.2	4.29	3.96	3.24	7.39	4.62	3.41	4.90	12.99	4.07	1.68	3.44	2.85	55.62
1875	22.7	24.0	31.8	43.2	58.5	68.1	73.0	71.9	62.3	52.3	37.5	31.9	49.2	2.72	4.29	8.24	3.28	2.71	3.50	4.42	5.56	2.10	3.18	7.44	1.90	44.63
1876	33.7	30.9	35.3	47.2	58.9	69.3	73.5	74.1	65.6	54.8	45.3	38.8	52.4	1.54	4.29	10.15	7.65	3.12	1.86	11.05	1.20	5.34	1.12	4.43	1.46	51.38
1877	27.1	35.6	37.7	48.3	59.3	69.3	73.5	74.1	65.6	54.8	45.3	38.8	52.4	6.90	1.07	8.09	8.44	3.75	2.62	2.57	5.69	1.18	10.09	7.11	4.50	51.38
1878	31.3	33.5	43.4	52.4	61.4	68.5	73.1	69.7	62.1	58.7	41.9	38.0	52.9	6.90	6.40	4.18	5.06	3.75	2.62	2.57	5.69	1.18	10.09	7.11	4.50	51.38
1879	26.5	27.1	37.0	46.1	61.4	68.5	73.1	69.7	62.1	58.7	41.9	38.0	52.9	2.69	3.89	5.82	6.06	3.22	4.62	9.50	9.40	3.14	1.41	2.83	4.41	55.50
1880	37.5	35.2	36.3	49.3	64.0	70.6	73.6	70.2	64.3	51.5	36.3	27.6	51.6	3.75	3.80	5.68	8.60	1.24	1.21	4.90	8.14	3.78	1.47	2.82	3.49	44.58
1881	21.4	26.8	31.6	36.9	43.5	51.4	66.2	71.6	69.7	64.5	55.3	37.8	49.7	5.91	4.52	3.69	1.55	6.05	1.83	3.63	2.51	1.45	2.78	4.18	4.75	51.38
1882	26.8	27.6	29.9	44.2	55.9	66.8	71.1	67.3	60.1	49.0	42.1	31.5	46.7	3.60	5.00	1.64	2.23	4.52	1.26	2.43	2.43	2.43	5.57	1.56	3.95	39.46
1883	26.8	27.6	29.9	44.2	55.9	66.8	71.1	67.3	60.1	49.0	42.1	31.5	46.7	4.05	3.15	4.15	2.36	3.82	1.26	2.43	2.43	2.43	5.57	1.56	3.95	39.46
1884	26.8	27.6	29.9	44.2	55.9	66.8	71.1	67.3	60.1	49.0	42.1	31.5	46.7	4.05	3.15	4.15	2.36	3.82	1.26	2.43	2.43	2.43	5.57	1.56	3.95	39.46
1885	26.8	27.6	29.9	44.2	55.9	66.8	71.1	67.3	60.1	49.0	42.1	31.5	46.7	4.05	3.15	4.15	2.36	3.82	1.26	2.43	2.43	2.43	5.57	1.56	3.95	39.46
1886	25.4	26.1	34.4	48.3	56.6	63.1	70.1	67.8	60.7	51.6	42.4	33.8	47.3	3.24	5.95	8.20	3.21	2.74	1.84	4.66	4.56	2.25	1.25	3.49	3.31	39.38
1887	25.2	29.8	31.3	44.3	48.4	60.5	74.5	67.8	63.2	52.8	42.7	32.6	43.2	3.24	5.95	8.20	3.21	2.74	1.84	4.66	4.56	2.25	1.25	3.49	3.31	39.38
1888	20.5	27.8	29.4	44.0	55.0	67.8	68.3	69.2	59.4	46.4	41.4	31.6	46.7	5.48	3.16	7.46	2.57	3.81	3.17	17.08	7.10	7.68	6.46	4.78	5.68	60.36
1889	24.2	25.0	38.7	48.6	59.6	67.4	70.0	68.5	63.0	48.8	44.2	34.8	50.6	4.47	2.08	1.44	4.01	3.83	3.17	17.08	7.10	7.68	6.46	4.78	5.68	60.36
1890	35.4	35.5	34.2	47.0	56.8	65.9	69.4	69.1	62.8	51.3	41.7	39.6	49.6	6.77	5.89	3.68	2.86	1.62	1.90	4.59	2.67	3.96	7.68	6.77	2.90	43.95
1891	30.8	32.3	35.1	48.6	56.0	66.2	67.6	70.6	66.4	56.8	40.8	34.8	49.0	5.89	5.89	3.68	2.86	1.62	1.90	4.59	2.67	3.96	7.68	6.77	2.90	43.95
1892	27.1	31.2	32.8	47.0	56.1	68.9	71.6	70.6	61.7	54.2	40.2	30.8	48.0	3.74	6.23	3.07	1.81	5.11	2.07	1.99	4.96	2.67	4.68	6.46	5.46	37.78
1893	20.2	25.9	33.7	45.2	56.8	66.4	70.9	70.6	60.1	52.2	40.2	30.8	48.0	2.41	3.77	1.16	2.24	4.49	2.07	1.99	4.96	2.67	4.68	6.46	5.46	37.78
1894	26.7	28.0	41.4	47.3	57.6	68.4	73.1	68.9	65.6	43.6	35.2	35.2	49.3	6.13	3.99	2.61	1.19	3.67	2.41	3.77	3.91	2.61	4.68	6.46	5.46	37.78
1895	26.0	28.6	30.8	48.2	61.9	65.2	72.2	71.3	62.9	49.3	40.3	35.2	49.3	1.82	2.05	3.96	2.44	3.67	2.47	3.91	3.96	2.67	4.68	6.46	5.46	37.78
1896	25.0	28.6	30.8	48.2	61.9	65.2	72.2	71.3	62.9	49.3	40.3	35.2	49.3	1.82	2.05	3.96	2.44	3.67	2.47	3.91	3.96	2.67	4.68	6.46	5.46	37.78
1897	29.4	31.2	42.4	47.8	58.8	66.9	72.0	72.4	66.6	54.2	41.0	31.0	50.7	4.98	4.56	2.54	4.43	3.03	2.47	10.63	6.51	7.25	6.91	2.83	5.61	57.89
1898	29.4	31.2	42.4	47.8	58.8	66.9	72.0	72.4	66.6	54.2	41.0	31.0	50.7	4.98	4.56	2.54	4.43	3.03	2.47	10.63	6.51	7.25	6.91	2.83	5.61	57.89
1899	27.8	24.6	34.4	47.0	58.4	68.8	71.5	69.9	62.2	54.2	42.0	34.0	49.6	2.59	3.39	7.28	1.79	2.92	2.59	.17	6.66	3.58	1.76	1.99	1.56	35.38
Mean 27 years	27.5	28.7	34.9	46.3	57.8	67.1	71.7	70.0	63.4	52.4	41.3	32.2	49.5	4.28	4.08	4.45	3.85	3.88	2.62	6.30	4.98	3.68	4.31	3.96	3.36	47.81

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